07/15/2010 15:26

Image# 10930975884

# **FORM 3X**

FE6AN026

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

	For Other Than An Author	ized Committee	Office Use (	Only
	USE FEC MAILING LABEL OR TYPE OR PRINT ₩	Example:If typing, type over the lines		
American College of Radiolog	y Association Political Action Comn	nittee		
ADDRESS (number and street)	1891 Preston White Drive			
Check if different				
than previously reported. (ACC)	Reston		VA 2019	91 – 📗 –
2. FEC IDENTIFICATION NUM	BER ♥ CITY ▲	l .	STATE A ZII	PCODE A
C00343459	3. IS TH		AMENDED (A)	
4. TYPE OF REPORT (Choose One)	(b) Monthly Report Feb 20 (	(M2) May 20 (M5	5) Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Reports:	Mar 20 (	(M3) Jun 20 (M6)	Sep 20 (M9)	(Non-Election Year Only)
April 15	Apr 20 (	M4) X Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
Quarterly Report(Q	1) (c) 12-Day	Primary (12P)	General (12G)	Runoff (12R)
July 15 Quarterly Report(Q:	DDE Election	Convention (12C)	Special (12S)	
Quarterly Report(Q	3)			
January 31 Quarterly Report(YE	E) Election or			the tate of
July 31 Mid-Year Report(Non-electior Year Only) (MY)	Post -Election	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Report for the:		in	tho
(TEN)	Election or			the tate of
5. Covering Period 0 6	01 2010	through 0 6	30 2010	
I certify that I have examined this F	Report and to the best of my knowled	dge and belief it is true, correc	ct and complete.	
Type or Print Name of Treasurer	DR William Herrington			
Signature of Treasurer Electron	nically Filed by DR William Herrin	ngton	Date 0 7 1 5	2010
NOTE : Submission of false, error	neous, or incomplete information ma	y subject the person signing t	this Report to the penalties of	2 U.S.C 437g.
Office Use Only				ORM 3X 12/2004)

FEC Form 3X (Rev. 02/2003)

## **SUMMARY PAGE** OF RECEIPTS AND DISBURSEMENTS

2 / 125

Write or Type Committee Name American College of Radiology Association Political Action Committee

D D <sup>®</sup>D 06 0 1 2010 0.6 3 0 2010 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 532260.11 January 1 (b) Cash on Hand at 782691.74 Begining of Reporting Period ..... 104682.67 701453.58 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 887374.41 1233713.69 6(a) and 6(c) for Column B) ..... 166574.39 512913.67 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 720800.02 720800.02 (subtract Line 7 from Line 6(d)) ..... Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

## DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 125

Write or Type Committee Name

American College of Radiology Association Political Action Committee

Report Covering the Period:

From:

<sup>D</sup> 0 1

то.

м м 0 6 D D D

Y Y Y Y 2 0 1 0

I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loa     (a) Individuals/Persons Oth			
Than Political Committe (i) Itemized (use Sche		101570.55	610612.02
(ii) Unitemized		3103.32	88317.91
(iii) TOTAL (add Lines 11(a)(i) and (i	i)	104673.87	698929.93
(b) Political Party Committee		0.00	0.00
(c) Other Political Committee (such as PACs)		0.00	0.00
11(a)(iii),(b) and (c)) (Ca Totals to Line 33, page		104673.87	698929.93
Transfers From Affiliated/Oth     Party Committees	-	0.00	0.00
3. All Loans Received		0.00	0.00
Loan Repayments Received     Offsets To Operating Expend		0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, pag 6. Refunds of Contributions Ma		0.00	0.00
to Federal candidates and Or Political Committees	-	0.00	2500.00
<ol> <li>Other Federal Receipts (Dividends, Interest, etc.)</li> </ol>		8.80	23.65
3. Transfers from Non-Federal	and Levin Funds		
(a) Non-Federal Account (from Schedule H3)		0.00	0.00
(b) Levin Funds (from Sched	ule H5)	0.00	0.00
(c) Total Transfer (add 18(a)	and 18(b)).	0.00	0.00
9. Total Receipts (add Lines 11 12, 13, 14, 15, 16, 17, and 18		104682.67	701453.58
Total Federal Receipts     (subtract Line 18(c) from Line	9 19)	104682.67	701453.58

## **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		1
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	0.00	194.00
	Expenditures(c) Total Operating Expenditures	0.00	1000
	(add 21(a)(i), (a)(ii) and (b))	0.00	194.00
22.	Transfers to Affiliated/Other Party	0.00	0.00
23.	Contributions to	0.00	0.00
	Federal Candidates/Committeesand Other Political Committees	166000.00	510000.00
24.	Independent Expenditure (use Schedule E)	0.00	0.00
5.	Coordinated Expenditures Made by Party		
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
27.	Loans Made	0.00	0.00
	Refunds of Contributions To:		
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees		0.00
	(such as PACs)(d) Total Contribution Refunds	0.00	0.00
	(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
		574.00	0740.07
9.	Other Disbursements	574.39	2719.67
0.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity (from Schedule H6)		
	(i) Federal Share	0.00	0.00
		0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add	0.00	0.00
	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	166574.39	512913.67
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	166574.39	512913.67

## **DETAILED SUMMARY PAGE**

of Disbursements

III. Net Contributions/Operating Expenditures		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	104673.87	698929.93
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	104673.87	698929.93
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	194.00
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	194.00

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Pag	e Chieck only one)
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Associations (In Full)	e name and address of any political comm	y person for the purpose of soliciting contributions littee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Joel Rakow Mailing Address 505 Ivy Lane  City Wyckoff  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group  Receipt For: Primary Other (specify)	State Zip Code NJ 07481-1072  C  Occupation Diagnostic Radiologist Aggregate Year-to-Date  330.0	Date of Receipt  M M M O G O 4 2 0 1 0  Transaction ID: 35099595  Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial) Dr. Patrick Toth  Mailing Address 201 E 80th St Apt 8F  City New York  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group  Receipt For: Primary General Other (specify)	State Zip Code NY 10021-0515  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date ▼  330.0	Date of Receipt  O 6  Transaction ID: 35099596  Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial) Dr. John DeMeritt Mailing Address 18 Baldwin Rd  City Saddle River  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group  Receipt For: Primary General Other (specify)	State Zip Code NJ 07458-3203  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date ▼  330.0	Date of Receipt  M M M D D D Y Y Y Y Y Y  O 6
SUBTOTAL of Receipts This Page (optional) .		90.00

	FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 7/125   (check only one)
0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Politic	al Action Committee	
	Full Name (Last, First, Middle Initial) Dr. Adam Bogomol			Date of Receipt
	Mailing Address 200 W 72nd St Apt 11	k		0 6 0 4 2 0 1 0
	City	State	Zip Code	Transaction ID: 35099598
	New York	NY	10023-2805	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Hackensack Radiology Group	Occupatio Diagnost	n ic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 330.00	
	Full Name (Last, First, Middle Initial) Dr. Harry Agress, JR			Date of Receipt
	Mailing Address Hackensack University 30 Prospect Ave			06 04 2010
	City Hackensack	State NJ	Zip Code 07601-1914	Transaction ID: 35099599
	FEC ID number of contributing federal political committee.	C	07001-1914	Amount of Each Receipt this Period  30.00
	Name of Employer Hackensack Radiology Group	Occupatio Diagnost	n ic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		330.00	
_	Full Name (Last, First, Middle Initial) Dr. Arthur S. Albert			Date of Receipt
	Mailing Address 124 W 60th St Apt 45			06 04 2010
	City	State	Zip Code	Transaction ID: 35099601
	New York	NY	10023-7451	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		30.00
	Name of Employer Hackensack Radiology Group	<del>, '                                   </del>	ic Radiologist	
	Receipt For: Primary General	Aggregate	e Year-to-Date ▼	_
	Other (specify)		330.00	
	SUBTOTAL of Receipts This Page (optional)			90.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 125 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American College of Radiology Ass	the name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Kavita Patel  Mailing Address 35 Annfield Ct			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Staten Island FEC ID number of contributing federal political committee.	State NY	Zip Code 10304-1301	Transaction ID: 35099602  Amount of Each Receipt this Period  30.00
Name of Employer Hackensack Radiology Group  Receipt For:  Primary  General  Other (specify) ▼	<del></del>	tic Radiologist e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Andrew Osiason Mailing Address 506 Julie Ct			Date of Receipt  0 6 0 4 2 0 1 0
City	State	Zip Code	Transaction ID: 35099603
Wyckoff FEC ID number of contributing federal political committee.	C	07481-1101	Amount of Each Receipt this Period  30.00
Name of Employer Hackensack Radiology Group	Occupatio Diagnost	n tic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 330.00	
Full Name (Last, First, Middle Initial) Dr. David Panush			Date of Receipt
Mailing Address 538 E 84th St Apt 4	E		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35099604
New York  FEC ID number of contributing federal political committee.	C	10028-7357	Amount of Each Receipt this Period  30.00
Name of Employer Hackensack Radiology Group	Occupatio Diagnost	n tic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 330.00	
	1		90.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any pers g the name and address of any political committee to esociation Political Action Committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Rita S. Patel Mailing Address 3 Ware Rd		Date of Receipt
City Upper Saddle River	State Zip Code NJ 07458-1919	Transaction ID: 35099605  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Hackensack Radiology Group  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Diagnostic Radiologist  Aggregate Year-to-Date   330.00	
Full Name (Last, First, Middle Initial) Dr. Mitchell Miller  Mailing Address 2 Constitution Ct A	Apt 1009	Date of Receipt    M   M   D   D   V   Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: 35099606
Hoboken	NJ 07030-6730	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	
Full Name (Last, First, Middle Initial) Dr. Sean D. Pierce		Date of Receipt
Mailing Address 509 48th Ave Apt 2	2A	06 04 2010
City	State Zip Code	Transaction ID: 35099607
Long Island City  FEC ID number of contributing federal political committee.	NY 11101-5604	Amount of Each Receipt this Period  30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	
SUBTOTAL of Receipts This Page (option	nal)	90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  Any information copied from such Reports and	for each category of the Detailed Summary Page  Statements may not be sold or used by any persor	FOR LINE NUMBER: PAGE 10 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  In for the purpose of soliciting contributions
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Asso	ne name and address of any political committee to excitation Political Action Committee	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. George Joseph Ferrone Mailing Address 440 E 62nd St Apt 18		Date of Receipt
	5F	06 04 2010
City	State Zip Code	Transaction ID: 35099608
New York  FEC ID number of contributing federal political committee.	NY 10065-8345	Amount of Each Receipt this Period  30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	
Full Name (Last, First, Middle Initial)  Dr. Hiten Magan Malde  Mailing Address 7 Kinkeld Ave		Date of Receipt
Mailing Address 7 Kinkaid Ave		06 04 2010
City	State Zip Code	Transaction ID: 35099609
Closter  FEC ID number of contributing federal political committee.	NJ 07624-2908	Amount of Each Receipt this Period  30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 330.00	
Full Name (Last, First, Middle Initial)  Dr. Gail Starr		Date of Receipt
Mailing Address Hackensack Univ Me 20 Prospect Ave Ste		0 6 0 4 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35099610
Hackensack	NJ 07601-1962	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼  211.53	
SUBTOTAL of Receipts This Page (optional)		79.23

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 125 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Associations (In Full)	e name and add	ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Gregory Nicola  Mailing Address 101 W End Ave Apt 1  City New York  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group  Receipt For: Primary General Other (specify)	State NY  C Occupation Diagnostic	Zip Code 10023-6337  c Radiologist Year-to-Date ▼ 211.53	Date of Receipt  M M M O 0 4 2 0 1 0  Transaction ID: 35099611  Amount of Each Receipt this Period  19.23
Full Name (Last, First, Middle Initial) Dr. Sunitha Sunkavalli  Mailing Address 943 High Mountain Re  City Franklin Lakes  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group  Receipt For: Primary General Other (specify)	State NJ C Occupation Diagnostic	Zip Code 07417-1619 C Radiologist Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  0 6 0 4 2 0 1 0  Transaction ID: 35099612  Amount of Each Receipt this Period  19.23
Full Name (Last, First, Middle Initial) Dr. Margaret Emy  Mailing Address 245 Oxford Dr  City Tenafly  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group  Receipt For: Primary General Other (specify)	_	Zip Code 07670-3117 C Radiologist Year-to-Date ▼	Date of Receipt  M M M / D D A 2 0 1 0  Transaction ID: 35099613  Amount of Each Receipt this Period  19.23
SUBTOTAL of Receipts This Page (optional) .			57.69

# SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 125 (check only one)    X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Assoc			on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)		2.7.6	
Dr. Joel Budin  Mailing Address 140 Chestnut St			Date of Receipt
Oth.	Ctata	7in Onda	06 04 2010
City Englewood	State NJ	Zip Code	Transaction ID: 35099614
	INJ	07631-3033	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnosti	n c Radiologist	
Receipt For: Primary General	Aggregate	Year-to-Date ▼	
Other (specify)		211.53	
Full Name (Last, First, Middle Initial) Dr. Clement Yang	1		Date of Receipt
Mailing Address 555 W 59th St Apt 19	M M / D D / Y Y Y Y Y O D D / 2010		
City	State	Zip Code	Transaction ID: 35099615
New York	NY	10019-1006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnosti	n c Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	
Full Name (Last, First, Middle Initial) Dr. William Kim			Date of Receipt
Mailing Address 405 Golf Course Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35099617
Leonia	NJ	07605-1415	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnosti	n c Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	
SUBTOTAL of Receipts This Page (optional)	1		57.69

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 13 / 125   (check only one)     X   11a     11b     11c     12     13     14     15     16     1
Any information copied from such Reports a or for commercial purposes, other than usin	and Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American College of Radiology As	ssociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Gene Han			Date of Receipt
Mailing Address 24 Briarcliff Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Tenafly	State NJ	Zip Code 07670-2902	Transaction ID: 35099618  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	07070 2002	19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 211.53	
Full Name (Last, First, Middle Initial) Dr. Robert Krugman	<b> </b>		Date of Receipt
Mailing Address 10 Lexington Ct			0 6 0 4 Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35099619
Englewood  FEC ID number of contributing federal political committee.	NJ C	07631-3081	Amount of Each Receipt this Period  19.23
Name of Employer Hackensack Radiology Group	Occupation	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 211.53	
Full Name (Last, First, Middle Initial) Dr. James Jelinek			Date of Receipt
Mailing Address Washington Hospi 110 Irving St NW	ital Center BA94		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State DC	Zip Code 20010-2975	Transaction ID: 35099621
FEC ID number of contributing federal political committee.	C	20010-2975	Amount of Each Receipt this Period 45.00
Name of Employer Center Radiology	Occupation Diagnost	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 315.00	
SUBTOTAL of Receipts This Page (option	nal)		83.46

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	sociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Carl Mazzola		Date of Receipt
Mailing Address 225 Pointe Lucerne		06 09 2010
City Ballwin	State Zip Code MO 63011-3360	Transaction ID: 35130339
FEC ID number of contributing federal political committee.	C 63011-3300	Amount of Each Receipt this Period  250.00
Name of Employer Prosight Imaging	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Norman Thomson, III		Date of Receipt
Mailing Address Radiology Assoc of 105 Wheeler Ct Ste	203	06 / 09 / 2010
City	State Zip Code	Transaction ID: 35130346
Savannah  FEC ID number of contributing federal political committee.	GA 31405-5717	Amount of Each Receipt this Period  500.00
Name of Employer Radiology Assoc of Savann- ah	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Gregory Boys		Date of Receipt
Mailing Address South Texas Radiol PO Box 29441	logy Group	0 6 0 8 2 0 1 0
City	State Zip Code	Transaction ID: 35158878
San Antonio	TX 78229-0441	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer South Texas Radiology Gro- up	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optiona	l)	1250.00
	ber only)	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 125 (check only one)    X   11a
	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Politic	al Action Committee	
Δ. Α.	Full Name (Last, First, Middle Initial) Dr. James S. Gilley			Date of Receipt
	Mailing Address South Texas Radiolog 8401 Datapoint Dr Ste			06 08 7 2010
	City	State	Zip Code	Transaction ID: 35158879
	San Antonio  FEC ID number of contributing federal political committee.	C	78229-5907	Amount of Each Receipt this Period  1000.00
	Name of Employer South Texas Radiology Gro- up, P.A.	, '	tic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
Б.	Full Name (Last, First, Middle Initial) Dr. John Gurian	1		Date of Receipt
	Mailing Address South Texas Radiolog 8401 Datapoint Dr Ste			06 08 7 2010
	City	State	Zip Code	Transaction ID: 35158880
	San Antonio  FEC ID number of contributing federal political committee.	C	78229-5907	Amount of Each Receipt this Period  1300.00
	Name of Employer South Texas Radiology Gro- up, P.A.	Occupation	n tic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1300.00	
- С.	Full Name (Last, First, Middle Initial) Dr. William Campbell, JR			Date of Receipt
	Mailing Address 527 N Palo Alto Ave			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 35158881
	Panama City  FEC ID number of contributing federal political committee.	C	32401-3639	Amount of Each Receipt this Period  200.00
	Name of Employer Bay Radiology Associates	Occupation Diagnos	n tic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
	SUBTOTAL of Receipts This Page (optional)			2500.00
İ	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16
	Statements may not be sold or used by any pers he name and address of any political committee	
NAME OF COMMITTEE (In Full)  American College of Radiology Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Carl Bailey, JR		Date of Receipt
Mailing Address 710 Bunkers Cove R  City	State Zip Code	06 08 2010
Panama City	FL 32401-3920	Transaction ID: 35158882  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 32-401 6020	200.00
Name of Employer Bay Radiology Associates	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Lloyd Logue		Date of Receipt
Mailing Address 3943 Indian Springs	Rd	0 6 D D 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35158883
Panama City	FL 32404-5794	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Bay Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) Dr. Gregory Presser		Date of Receipt
Mailing Address 706 Bunkers Cove R	d	0 6 0 8 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35158884
Panama City	FL 32401-3920	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Bay Radiology Associates, P.A.	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional)	•	600.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 125 (check only one)    X
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Assoc	e name and add	dress of any political committee to	on for the purpose of soliciting contributions
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) Dr. Scott Ramey			Date of Receipt
	Mailing Address Bay Radiology Assoc PO Box 1770 City	PA State	Zip Code	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Panama City  FEC ID number of contributing federal political committee.	FL C	32402-1770	Amount of Each Receipt this Period 200.00
	Name of Employer Bay Radiology Associates, P.A.  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	<del>, '                                     </del>	n ic Radiologist Year-to-Date ▼	
- В.	Full Name (Last, First, Middle Initial) Dr. James Strohmenger  Mailing Address 2818 Canal Dr			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 35158886
	Panama City  FEC ID number of contributing federal political committee.	C	32405-1610	Amount of Each Receipt this Period  200.00
	Name of Employer Bay Radiology Associates	Occupatio Diagnost	n ic Radiologist	
	Receipt For:  Primary General  Other (specify) ♥	Aggregate	e Year-to-Date  600.00	
- >.	Full Name (Last, First, Middle Initial) Dr. Emily Billingsley	1		Date of Receipt
	Mailing Address 449 Sudduth Ave			06 08 2010
	City Panama City	State FL	Zip Code 32401-3958	Transaction ID: 35158887
	FEC ID number of contributing federal political committee.	C	32401-3930	Amount of Each Receipt this Period  200.00
	Name of Employer Bay Radiology Associates	<del>, '                                   </del>	ic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
	SUBTOTAL of Receipts This Page (optional)		<b>)</b>	600.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 125 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persoring the name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology A	ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Jason Browning		Date of Receipt
Mailing Address 1016 Sunset Ln		06 08 2010
City	State Zip Code	Transaction ID: 35158888
Lynn Haven	FL 32444-3455	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Bay Radiology Associates	Occupation Diagnostic Radiologist	7
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Wendy Kriegel		Date of Receipt
Mailing Address 528 S Bonita Ave		M M / D D / Y Y Y Y Y O D O O O O O O O O O O O O O
City	State Zip Code	Transaction ID: 35158889
Panama City	FL 32401-3979	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Bay Radiology Associates	Occupation Diagnostic Radiologist	1
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Janet Storella		Date of Receipt
Mailing Address 6515 Fallwind Ln		M M / D D / Y Y Y Y Y O D O O O O O O O O O O O O O
City	State Zip Code	Transaction ID: 35158890
Bethesda	MD 20817-4941	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Drs Grover, Christie & Me- rritt	Occupation Diagnostic Radiologist	1
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 440.00	
SUBTOTAL of Receipts This Page (option	nal)	440.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate schedule( for each category of the Detailed Summary Page	(critical dialy dial)
	Statements may not be sold or used by any he name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American College of Radiology Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Ronald Phelps		Date of Receipt
Mailing Address 824 Canyon Rd N		06 08 7 2010
City	State Zip Code	Transaction ID: 35158891
Tuscaloosa	AL 35406-2104	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer The Radiology Clinic, LLC	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2000.00	
Full Name (Last, First, Middle Initial) Dr. Richard Kendrick	•	Date of Receipt
Mailing Address 14470 Koffman Ran	ch Rd	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35158892
North Port	AL 35475-2310	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer The Radiology Clinic, LLC	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Dr. Timothy McGhee		Date of Receipt
Mailing Address The Radiology Clinic 208 McFarland Cir N		06 08 7 2010
City	State Zip Code	Transaction ID: 35158893
Tuscaloosa	AL 35406-1809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer The Radiology Clinic, LLC	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	2000.00	)
SUBTOTAL of Receipts This Page (optional)	1	6000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 125 (check only one)    X
Any information copied from such Reports and Si or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Association	name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Charles King, JR  Mailing Address The Radiology Clinic 208 McFarland Cir N  City Tuscaloosa  FEC ID number of contributing federal political committee.	State AL	Zip Code 35406-1809	Date of Receipt  M M M / D D / Y Y Y Y Y  0 6 0 8 2 0 1 0  Transaction ID: 35158894  Amount of Each Receipt this Period  2000.00
Name of Employer The Radiology Clinic, LLC  Receipt For:  Primary General Other (specify) ▼	<del></del>	n tic Radiologist e Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Dr. Cathy Lovett  Mailing Address The Radiology Clinic 208 McFarland Cir N  City Tuscaloosa  FEC ID number of contributing federal political committee.  Name of Employer The Radiology Clinic, LLC  Receipt For: Primary General	'	tic Radiologist e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 0 8 2 0 1 0  Transaction ID: 35158895  Amount of Each Receipt this Period  2000.00
Full Name (Last, First, Middle Initial) Dr. Howard Holley Mailing Address The Radiology Clinic 208 McFarland Cir N City Tuscaloosa FEC ID number of contributing federal political committee.	State AL	Zip Code 35406-1809	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer The Radiology Clinic, LLC  Receipt For:  Primary  Other (specify) ▼		n tic Radiologist e Year-to-Date ▼ 2000.00	
SUBTOTAL of Receipts This Page (optional)			6000.00

# SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any personal the name and address of any political committee to esociation Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Russell Scholl Mailing Address 1800 Lake Haven C  City Tuscaloosa  FEC ID number of contributing federal political committee.  Name of Employer The Radiology Clinic, LLC  Receipt For: Primary General Other (specify)	State Zip Code AL 35406-5014  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date  2000.00	Date of Receipt  0 6 0 8 2 0 1 0  Transaction ID: 35158897  Amount of Each Receipt this Period  2000.00
Full Name (Last, First, Middle Initial) Dr. J Alex Lushington, JR  Mailing Address The Radiology Clini 208 McFarland Cir I City Tuscaloosa  FEC ID number of contributing federal political committee.  Name of Employer The Radiology Clinic, LLC  Receipt For: Primary General Other (specify)		Date of Receipt  M M M / D D M / 2010  Transaction ID: 35158898  Amount of Each Receipt this Period  2000.00
Full Name (Last, First, Middle Initial) Dr. J Byron Speed Mailing Address 2695 Beacon Hill Pl  City Tuscaloosa FEC ID number of contributing federal political committee.  Name of Employer The Radiology Clinic, LLC  Receipt For: Primary General Other (specify)	State Zip Code AL 35406-3680  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date  2000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	J)	6000.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 125 (check only one)    X
or for commercial purposes, other than u	ts and Statements may not be sold or used by any perso sing the name and address of any political committee to  Association Political Action Committee	n for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Elizabeth Caldwell		Date of Receipt
Mailing Address 2711 Regatta W City	State Zip Code	M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Tuscaloosa  FEC ID number of contributing federal political committee.	AL 35406-4022	Amount of Each Receipt this Period  2000.00
Name of Employer The Radiology Clinic, LLC  Receipt For:  Primary General  Other (specify) ▼	Occupation Diagnostic Radiologist  Aggregate Year-to-Date   2000.00	
Full Name (Last, First, Middle Initial) Dr. Margaret Guarisco  Mailing Address The Radiology ( 208 McFarland	Cir N	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Tuscaloosa	State Zip Code AL 35406-1809	Transaction ID: 35158901
FEC ID number of contributing federal political committee.	AL 35406-1809	Amount of Each Receipt this Period
Name of Employer The Radiology Clinic, LLC	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1920.00	
Full Name (Last, First, Middle Initial) Dr. Grady Miller		Date of Receipt
Mailing Address 3054 Yorktown	Dr	0 6 0 8 2 0 1 0
City	State Zip Code	Transaction ID: 35158902
Tuscaloosa  FEC ID number of contributing federal political committee.	AL 35406-2713	Amount of Each Receipt this Period  2000.00
Name of Employer The Radiology Clinic, LLC	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
SUBTOTAL of Receipts This Page (opt	ional)	5920.00
TOTAL This Period (last page this line	number only)	

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page and Statements may not be sold or used by any perso	FOR LINE NUMBER: PAGE 23 / 125 (check only one)    X
or for commercial purposes, other than us  NAME OF COMMITTEE (In Full)	ing the name and address of any political committee to  Association Political Action Committee	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Bernard Veillon		Date of Receipt
Mailing Address 3320 Harbor Ridge	ge Way	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35158915
<u>Tuscaloosa</u>	AL 35406-4017	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer The Radiology Clinic, LLC	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Dr. Mathew Merritt		Date of Receipt
Mailing Address 208 McFarland C	Pircle North	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35158916
Tuscaloosa	AL 35406-1800	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer The Radiology Clinic, LLC	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Dr. Robert Hamiter		Date of Receipt
Mailing Address The Radiology C 208 McFarland C		0 6 0 8 2 0 1 0
City	State Zip Code	Transaction ID: 35158917
Tuscaloosa	AL 35406-1809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer The Radiology Clinic, LLC	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
SUBTOTAL of Receipts This Page (ontin	onal)	6000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 125 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements may no name and addres	ot be sold or used by any persons of any political committee to	
American College of Radiology Associa	ation Political A	Action Committee	
Full Name (Last, First, Middle Initial) Dr. Hugh Borak			Date of Receipt
Mailing Address The Radiology Clinic 208 McFarland Cir N			0 6 0 8 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35158918
Tuscaloosa	AL	35406-1809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2000.00
Name of Employer The Radiology Clinic, LLC	Occupation Diagnostic F	Radiologist	
Receipt For:		ear-to-Date ▼	
Primary General Other (specify) ▼		2000.00	
Full Name (Last, First, Middle Initial) Dr. David Smith			Date of Receipt
Mailing Address 1314 Downing Rdg			M M / D D / Y Y Y Y Y O D O D O D O D O D O D O D O
City	State	Zip Code	Transaction ID: 35158919
Tuscaloosa	AL	35406-3642	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		2000.00
Name of Employer The Radiology Clinic, LLC	Occupation Diagnostic F	Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye		
Full Name (Last, First, Middle Initial) Dr. Christopher Sneckenberger			Date of Receipt
Mailing Address 979 Germantown Rd			06 08 2010
City	State	Zip Code	Transaction ID: 35158921
Tuscaloosa	AL	35406-3668	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		2000.00
Name of Employer The Radiology Clinic, LLC	Occupation Diagnostic F	Radiologist	7
Receipt For:  Primary General  Other (specify) ▼	, <del>'</del>	2000.00	
SUBTOTAL of Receipts This Page (optional)		······	6000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using th	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American College of Radiology Associ	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Jason Bearden  Mailing Address 701 Indian Hills Dr		Date of Receipt
	State Zip Code	06 08 2010
City <u>Tusca</u> loosa	AL 35406-2230	Transaction ID: 35158922  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer The Radiology Clinic, LLC	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  2000.00	
Full Name (Last, First, Middle Initial) Dr. James Bankston, JR		Date of Receipt
Mailing Address 2605 Saratoga Ln		0 6 0 8 2 0 1 0
City	State Zip Code	Transaction ID: 35158923
Tuscaloosa	AL 35406-1642	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer The Radiology Clinic, LLC	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	
Full Name (Last, First, Middle Initial) Dr. Clarence Davis, III		Date of Receipt
Mailing Address 609 Springlake Rd		0 6 1 5 / Y Y Y Y Y
City	State Zip Code	Transaction ID: 35183908
Columbia  FEC ID number of contributing federal political committee.	SC 29206-2150	Amount of Each Receipt this Period  250.00
Name of Employer Lexington Radiology Assoc- iates	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional) .		4250.00
TOTAL This Period (last page this line numbe	·	

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 125 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Any information copied from such Reports a or for commercial purposes, other than usir	and Statements may not be sold or used by any person og the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American College of Radiology As	ssociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. John Lohnes, JR		Date of Receipt
Mailing Address Wichita Radiologic PO Box 8903	cal Group PA	0 6 1 5 2 0 1 0
City	State Zip Code	Transaction ID: 35183909
Wichita	KS 67208-0903	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Wichita Radiological Group PA	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Bibb Allen, JR	I	Date of Receipt
Mailing Address 3245 E Briarcliff F	Rd	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35183910
Birmingham	AL 35223-1304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	625.00
Name of Employer Montclair Baptist Medical Center	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Dr. Steven Miller	I	Date of Receipt
Mailing Address 23 Moffat Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35183911
Waban	MA 02468-1112	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Newton Wellesley Hosp	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (option	nal)	1125.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 125 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may the name and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
American College of Radiology Ass	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Thomas Poulton			Date of Receipt
Mailing Address Aultman Hospital 2600 6th St SW			06 15 2010
City	State	Zip Code	Transaction ID: 35183912
Canton	OH	44710-1799	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Aultman Hospital	Occupation Diagnost	n ic Radiologist	
Receipt For:		Year-to-Date ▼	7
Primary General Other (specify) ▼		500.00	]
Full Name (Last, First, Middle Initial) Dr. Timothy Farrell	L		Date of Receipt
Mailing Address 128 Killarney			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35183928
Williamsburg	VA	23188-8415	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Peninsula Radiology	Occupation Diagnost	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Bradford Richmond			Date of Receipt
Mailing Address Cleveland Clinic For 9500 Euclid Ave	undation		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35184049
Cleveland	OH	44195-5021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Cleveland Clinic Foundati- on	Occupation Diagnost	n ic Radiologist	7
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	240.00	
SUBTOTAL of Receipts This Page (optional	<u> </u>		540.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 125 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American College of Radiology Ass	d Statements may not be sold or used by any perso the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Hadiology Ass	ociation Foiltical Action Committee	
Full Name (Last, First, Middle Initial) Dr. Eric Tocci		Date of Receipt
Mailing Address 437 Triton Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35184050
Ormond Beach	FL 32176-5459	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Radiology Associates of	Occupation	7
Daytona Beach	Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Scott Klioze		Date of Receipt
Mailing Address 7 Cypress Hollow Li	n	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35184051
Ormond Beach	FL 32174-3047	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Radiology Associates of Daytona Beach	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Robert Newman		Date of Receipt
Mailing Address 913 Southview Pl N	E	0 6 1 5 2 0 1 0
City	State Zip Code	Transaction ID: 35184052
Lenoir	NC 28645-3755	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Lenoir Radiology	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional	]	200.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 29 / 125 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Radiology As	g the name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Andrew Beloni  Mailing Address 5624 Laurium Rd			Date of Receipt
City Charlotte	State NC	Zip Code 28226-5610	Transaction ID: 35184053  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		45.00
Name of Employer Charlotte Radiology  Receipt For:  Primary  General  Other (specify) ▼	<del> </del>	n ic Radiologist e Year-to-Date ▼ 270.00	]
Full Name (Last, First, Middle Initial) Dr. Ira Adler Mailing Address 879 Lexington Dr	<b>'</b>		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35184054
Greenville	NC	27834-0549	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Eastern Radiologists	Occupatio Diagnost	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Dr. Kevin O'Brien			Date of Receipt
Mailing Address St Johns Macomb 11800 E 12 Mile R	d .		06 / 15 / 2010
City <u>W</u> arren	State MI	Zip Code 48093-3494	Transaction ID: 35184056  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70000 0707	83.34
Name of Employer Diagnostic Radiology Cons- ultants, PC Receipt For:		ic Radiologist	
Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 293.34	
SUBTOTAL of Receipts This Page (option	al)		168.34

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 30 / 125 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American College of Radiology Ass	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Terry Martin		Date of Receipt
Mailing Address Rad Assoc of Biirmi 2090 Columbiana R		0 6 1 5 2 0 1 0
City	State Zip Code	Transaction ID: 35184057
Birmingham	AL 35216-2152	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100.00
Name of Employer Rad Assoc of Biirmingham PC	Occupation Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	600.00	
Full Name (Last, First, Middle Initial) Dr. Kent Lancaster		Date of Receipt
Mailing Address 3141 Sundance Pat	th	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35184058
Stevensville	MI 49127-9376	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Radiology Associates of Berrie	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	
Full Name (Last, First, Middle Initial) Dr. Paul Ellenbogen		Date of Receipt
Mailing Address 6612 Cliffbrook Dr		M M / D D / Y Y Y Y Y O D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35184060
<u>Dallas</u>	TX 75254-8613	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	208.34
Name of Employer Southwest Imaging & Inter- ven specialis	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.04	
SUBTOTAL of Receipts This Page (optional	l)	350.34

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 125 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any personant the name and address of any political committee to	
American College of Radiology Ass	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. James Courtney		Date of Receipt
Mailing Address 27 Hillwood Rd  City	State Zip Code	0 6 1 5 2 0 1 0
Mobile	AL 36608-2311	Transaction ID: 35184062  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Radiology Associates of Mobile	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 301.25	1
Full Name (Last, First, Middle Initial) Dr. Demetrius Morros Mailing Address 7418 Ridgecrest Co	urt Rd	Date of Receipt
		06 15 2010
City	State Zip Code AL 35242-0525	Transaction ID: 35184063
Birmingham  FEC ID number of contributing federal political committee.	AL 35242-0525	Amount of Each Receipt this Period  83.34
Name of Employer Birmingham Radiological Group P.C.	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) Dr. Jugesh Cheema		Date of Receipt
Mailing Address 2466 Oak Bend Pl		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35184064
Newburgh  FEC ID number of contributing federal political committee.	IN 47630-8053	Amount of Each Receipt this Period  60.00
Name of Employer Medical Center of Delaware	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	
SURTOTAL of Receipts This Page (optional	)	185.34

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Radiology Ass	d Statements may not be sold or used by any person the name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Paul Lampert  Mailing Address 2240 S. Elks Lane Unit 55  City Yuma  FEC ID number of contributing federal political committee.  Name of Employer MDIG  Receipt For: Primary General Other (specify)	State Zip Code AZ 85364-6284  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date  750.00	Date of Receipt  M M / D D / Y Y Y Y Y  O 6 15 2010  Transaction ID: 35184066  Amount of Each Receipt this Period  125.00
Full Name (Last, First, Middle Initial) Dr. Daniel Cohen Mailing Address 1480 Brookfield Roa  City Yardley FEC ID number of contributing federal political committee.  Name of Employer Radiology Affiliates of Central New Je Receipt For: Primary General Other (specify)	State Zip Code PA 19067-3930  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date   240.00	Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Raja Cheruvu Mailing Address 165 Via Foresta Ln  City Williamsville  FEC ID number of contributing federal political committee.  Name of Employer Windsong Radiology Group  Receipt For: Primary General Other (specify)	State Zip Code NY 14221-1984  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date   1100.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	l) <b>&gt;</b>	215.00

SCHEDULE A	(FEC Form 3X) CEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 125 (check only one)    X
NAME OF COMM			on for the purpose of soliciting contributions solicit contributions from such committee.
	Mobile Infirmary Medical Cen PO Box 2144	ate Zip Code	Date of Receipt  0 6 15 2010  Transaction ID: 35184073
Mobile FEC ID number of federal political cor		_ 36652-2144	Amount of Each Receipt this Period 50.00
Name of Employer Mobile Infirmary M Center Receipt For:  Primary  Other (speci	edical Dia: Agg General	upation gnostic Radiologist gregate Year-to-Date ▼	
			Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	Sta	ate Zip Code	Transaction ID: 35184074
Huntsville	Al	_ 35801-4537	Amount of Each Receipt this Period
FEC ID number of federal political con			100.00
Name of Employer Baptist Medical Ct lair	r-Montc- Occ	upation gnostic Radiologist	
Receipt For: Primary Other (speci	General	regate Year-to-Date ▼ 600.00	
Full Name (Last, F Dr. H E. Longmaid,			Date of Receipt
Mailing Address	52 Harwich Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		ate Zip Code	Transaction ID: 35184075
Chestnut Hill FEC ID number of federal political con		A 02467-3023	Amount of Each Receipt this Period 41.67
Name of Employer Deaconess Hospit	Occ al Dia	upation gnostic Radiologist	
Receipt For: Primary Other (speci	General Agg	regate Year-to-Date ▼ 250.02	
SUBTOTAL of Rece	ipts This Page (optional)		191.67

	EDULE A (FEC Form 3X) MIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 125 (check only one)    X
or for o	formation copied from such Reports and commercial purposes, other than using to the COMMITTEE (In Full)	Statements may he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	nerican College of Radiology Asso	ciation Politic	al Action Committee	
Dr.	Name (Last, First, Middle Initial) William Deeter, III			Date of Receipt
Mai ————————————————————————————————————	iling Address 14 Ryedale Ct	State	Zip Code	0 6 1 5 2 0 1 0 2 0 1 0
	eenville	Scale	29615-6037	Transaction ID: 35184079  Amount of Each Receipt this Period
FE	C ID number of contributing eral political committee.	C	25015 0007	41.67
Nar Gre	me of Employer eenville Radiology	Occupatio	n	
Rec	ceipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.02	
	Name (Last, First, Middle Initial) James Hiken			Date of Receipt
Mai	iling Address 7109 Cove Pointe Pl			0 6 1 5 2 0 1 0
City	/	State	Zip Code	Transaction ID: 35184080
Pro	ospect	KY	40059-9680	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	C		42.00
Nai Dia Lou	me of Employer g. Imaging Alliance of aisville	Occupatio Diagnost	n ic Radiologist	
	ceipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	252.00	
	Name (Last, First, Middle Initial) Timothy Crummy			Date of Receipt
Mai	ling Address 2509 Middleton Bead	ch Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 35184083
Mic	ddleton	WI	53562-2912	Amount of Each Receipt this Period
	C ID number of contributing eral political committee.	С		30.42
Ma	ne of Employer dison Radiologists	Occupatio Diagnost	n ic Radiologist	
Red	ceipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 382.52	
CURT	OTAL of Receipts This Page (optional)	1		114.09

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 125 (check only one)    X
	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Associations	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
. ∠ 	Full Name (Last, First, Middle Initial) Dr. Kevin Smith			Date of Receipt
	Mailing Address Regional Diagnostic F 1406 6th Ave N	Radiology		06 15 2010
	City <u>Saint Cloud</u>	State MN	Zip Code 56303-1900	Transaction ID: 35184084  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		208.34
	Name of Employer Regional Diagnostic Radio- logy Receipt For:  Primary General Other (specify) ▼	, '	n ric Radiologist e Year-to-Date ▼ 1250.04	
- 3.	Full Name (Last, First, Middle Initial) Dr. Raul de la Vega, III Mailing Address 2936 Grampian Dr			Date of Receipt
	City	State	Zip Code	0 6 1 5 2 0 1 0 Transaction ID: 35184085
	Gastonia	NC	28054-6402	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		45.00
	Name of Employer Shelby Radiological Assoc- iates	Occupatio Diagnost	n ic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 270.00	
	Full Name (Last, First, Middle Initial) Dr. Edward Fallon, III			Date of Receipt
	Mailing Address West Reading Radiological S7th Ave	ogy Assoc		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 35429897
	West Reading  FEC ID number of contributing federal political committee.	C	19611-1410	Amount of Each Receipt this Period  250.00
	Name of Employer West Reading Radiology As- soc	Occupatio Diagnost	n ric Radiologist	
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional) .	1		503.34

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 36 / 125 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any pers the name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
American College of Radiology Ass	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Ginseppe Ammirati		Date of Receipt
Mailing Address 12777 Via Terceto		M M / D D / Y Y Y Y Y Y Y 1
City	State Zip Code	Transaction ID: 35429898
San Diego	CA 92130-2176	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer La Jolla Radiology Medical	Occupation	
Group	Diagnostic Radiologist	
Receipt For:  Primary  General	Aggregate Year-to-Date ▼	_
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) Dr. Robert Varney		Date of Receipt
Mailing Address 1752 Wilstone Ave		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35429899
Encinitas	CA 92024-1124	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer La Jolla Radiology Medical Group	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Dr. Kris Van Lom		Date of Receipt
Mailing Address La Jolla Rad Med G 10150 Sorrento Vall		0 6 1 8 2 0 1 0
City	State Zip Code	Transaction ID: 35429900
San Diego	CA 92121-1614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer La Jolla Radiology Medical Group	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional	1	750.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 125 (check only one)    X   11a
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Associ	iation Politic	cal Action Committee	
∠ A.	Full Name (Last, First, Middle Initial) Dr. Trevor Nelson			Date of Receipt
	Mailing Address La Jolla Radiology Me 10150 Sorrento Valley	edical Group Rd Ste 320		06 18 2010
	City <u>San Diego</u>	State CA	Zip Code 92121-1614	Transaction ID: 35429901  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	32121 1017	250.00
	Name of Employer La Jolla Radiology Medical Group Receipt For: Primary General	, '	tic Radiologist e Year-to-Date ▼	1
_	Other (specify) ▼	0 0	250.00	
В.	Full Name (Last, First, Middle Initial)  Dr. Lonnie Simmons  Mailing Address Gundersen/Lutheran N  1900 South Ave C02-0		ter	Date of Receipt  0 6 1 8 2 0 1 0
	City	State	Zip Code	Transaction ID: 35429922
	La Crosse  FEC ID number of contributing federal political committee.	C	54601-5467	Amount of Each Receipt this Period  83.34
	Name of Employer Gundersen Lutheran Clinic	Occupation Diagnost	on tic Radiologist	7
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.04	
_ C.	Full Name (Last, First, Middle Initial) Dr. Rita S. Patel			Date of Receipt
	Mailing Address 3 Ware Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 35442078
	Upper Saddle River  FEC ID number of contributing federal political committee.	NJ C	07458-1919	Amount of Each Receipt this Period  30.00
	Name of Employer Hackensack Radiology Group	Occupatio	on tic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	<del>, '                                   </del>	e Year-to-Date ▼ 360.00	
	SUBTOTAL of Receipts This Page (optional) .	1		363.34
	TOTAL This Period (last page this line number			

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 38 / 125 (check only one)    X
	information copied from such Reports and S or commercial purposes, other than using the IAME OF COMMITTEE (In Full) American College of Radiology Assoc			
. <u>C</u> N	full Name (Last, First, Middle Initial) Or. Mitchell Miller Mailing Address 2 Constitution Ct Apt	1009		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
<u> </u>	City  Hoboken  EC ID number of contributing	State NJ	Zip Code 07030-6730	Transaction ID: 35442079  Amount of Each Receipt this Period
fe N H	lame of Employer lackensack Radiology Group  Receipt For: Primary General Other (specify)	, '	on tic Radiologist e Year-to-Date ▼ 360.00	30.00
_	full Name (Last, First, Middle Initial) Or. George Joseph Ferrone Mailing Address 440 E 62nd St Apt 18f	F		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
C	City	State	Zip Code	Transaction ID: 35442080
1	New York	NY	10065-8345	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		30.00
_	lame of Employer Hackensack Radiology Group	Occupatio Diagnost	n tic Radiologist	
F	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 360.00	
	full Name (Last, First, Middle Initial) Dr. Hiten Magan Malde Mailing Address 7 Kinkaid Ave			Date of Receipt  0 6 2 2 2 2 0 1 0
C	City	State	Zip Code	Transaction ID: 35442081
F	Closter EC ID number of contributing	NJ	07624-2908	Amount of Each Receipt this Period 30.00
_	ederal political committee.  Jame of Employer  Jackensack Radiology Group	Occupatio	on tic Radiologist	
F	Receipt For: Primary General Other (specify)	<del>, '                                   </del>	e Year-to-Date ▼ 360.00	
SUI	BTOTAL of Receipts This Page (optional)			90.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 125 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than  NAME OF COMMITTEE (In Full)	rts and Statements may not be sold or used by any per- using the name and address of any political committee.  Association Political Action Committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Adam Bogomol Mailing Address 200 W 72nd S  City New York  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group	Apt 11k  State Zip Code NY 10023-2805  C  Occupation Diagnostic Radiologist	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 35442082  Amount of Each Receipt this Period  30.00
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 360.00	
30 Prospect Available Street Street Available Street Avai	State Zip Code NJ 07601-1914  C Occupation Diagnostic Radiologist	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: 35442083  Amount of Each Receipt this Period  30.00
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 360.00	
Dr. Arthur S. Albert  Mailing Address 124 W 60th St  City  New York  FEC ID number of contributing federal political committee.	Apt 45  State Zip Code  NY 10023-7451  C	Date of Receipt  M M M 22 2 2010  Transaction ID: 35442084  Amount of Each Receipt this Period  30.00
Name of Employer Hackensack Radiology Group  Receipt For:  □ Primary □ General □ Other (specify) ▼	Occupation Diagnostic Radiologist  Aggregate Year-to-Date ▼  360.00	
SUBTOTAL of Receipts This Page (o	otional)	90.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^\	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 40 / 125   (check only one)     X   11a
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American College of Radiology Ass	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Kavita Patel			Date of Receipt
Mailing Address 35 Annfield Ct			06 22 2010
City Staten Island	State NY	Zip Code 10304-1301	Transaction ID: 35442085
FEC ID number of contributing federal political committee.	C	10304-1301	Amount of Each Receipt this Period  30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 330.00	
Full Name (Last, First, Middle Initial) Dr. Andrew Osiason	I		Date of Receipt
Mailing Address 506 Julie Ct			0 6 2 2 2 2 1 0
City Wyckoff	State <b>NJ</b>	Zip Code 07481-1101	Transaction ID: 35442086
FEC ID number of contributing federal political committee.	C	07401-1101	Amount of Each Receipt this Period  30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For:    Primary   General		e Year-to-Date ▼	
Other (specify)	0 0	360.00	
Full Name (Last, First, Middle Initial) Dr. David Panush	I		Date of Receipt
Mailing Address 538 E 84th St Apt 4	4E		06 22 2010
City New York	State NY	Zip Code 10028-7357	Transaction ID: 35442087
FEC ID number of contributing federal political committee.	C	10026-1337	Amount of Each Receipt this Period  30.00
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 360.00	
SUBTOTAL of Receipts This Page (optional	al)		90.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 125 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any person the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Joel Rakow Mailing Address 505 Ivy Lane  City Wyckoff  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group  Receipt For:	State Zip Code NJ 07481-1072  C  Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 2 2 2 2 0 1 0  Transaction ID: 35442088  Amount of Each Receipt this Period  30.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Dr. Patrick Toth  Mailing Address 201 E 80th St Apt 8	360.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City  New York  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group  Receipt For:  Primary General	State Zip Code NY 10021-0515  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date ▼	Transaction ID: 35442089  Amount of Each Receipt this Period  30.00
Other (specify) ▼  Full Name (Last, First, Middle Initial) Dr. John DeMeritt  Mailing Address 18 Baldwin Rd  City	State Zip Code	Date of Receipt    M M
Saddle River  FEC ID number of contributing federal political committee.	NJ 07458-3203	Amount of Each Receipt this Period  30.00
Name of Employer Hackensack Radiology Group  Receipt For:  Primary General  Other (specify) ▼	Occupation Diagnostic Radiologist  Aggregate Year-to-Date   360.00	
SUBTOTAL of Receipts This Page (optional	J) <b>&gt;</b>	90.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 125 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Associations and S or for commercial purposes, other than using the	e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Sean D. Pierce Mailing Address 509 48th Ave Apt 2A  City Long Island City  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group  Receipt For: Primary General	State Zip Code NY 11101-5604  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 2 2 2 2 0 1 0  Transaction ID: 35442091  Amount of Each Receipt this Period  30.00
Full Name (Last, First, Middle Initial) Dr. Regina Chu Mailing Address 15 Ogle Rd  City Old Tappan  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group  Receipt For: Primary General	State Zip Code NJ 07675-7028  C  Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 22 2 2 0 1 0  Transaction ID: 35442092  Amount of Each Receipt this Period  19.23
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Dr. Sunitha Sunkavalli Mailing Address 943 High Mountain Ro  City Franklin Lakes  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group	State Zip Code NJ 07417-1619  C Occupation	Date of Receipt  M M M / D D D / Y Y Y Y Y  O 6 2 2 2 2 0 1 0  Transaction ID: 35442094  Amount of Each Receipt this Period  19.23
Receipt For: Primary General Other (specify)  SUBTOTAL of Receipts This Page (optional)	Diagnostic Radiologist  Aggregate Year-to-Date ▼  230.76	68.46

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 125 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American College of Radiology Ass	d Statements may not be sold or used by any perso the name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Margaret Emy Mailing Address 245 Oxford Dr  City Tenafly  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group  Receipt For: Primary General Other (specify)	State Zip Code NJ 07670-3117  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date  230.76	Date of Receipt  M M M / D D / Y Y Y Y Y Y  Transaction ID: 35442095  Amount of Each Receipt this Period  19.23
Full Name (Last, First, Middle Initial) Dr. Joel Budin  Mailing Address 140 Chestnut St  City Englewood  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group  Receipt For: Primary General Other (specify)	State Zip Code NJ 07631-3033  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date  230.76	Date of Receipt  M M / D D / Y Y Y Y Y Y  Transaction ID: 35442096  Amount of Each Receipt this Period  19.23
Full Name (Last, First, Middle Initial) Dr. Clement Yang Mailing Address 555 W 59th St Apt  City New York  FEC ID number of contributing federal political committee.  Name of Employer Hackensack Radiology Group  Receipt For: Primary General Other (specify)	State Zip Code NY 10019-1006  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date  230.76	Date of Receipt  M M / D D / Y Y Y Y Y  O 6 2 2 2 2 0 1 0  Transaction ID: 35442097  Amount of Each Receipt this Period  19.23
SUBTOTAL of Receipts This Page (optional	)	57.69

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 125 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American College of Radiology Ass	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. William Kim			Date of Receipt
Mailing Address 405 Golf Course Dr  City	State	Zip Code	0 6 22 2010
Leonia	NJ	07605-1415	Transaction ID: 35442098  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0,000	19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnost	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 230.76	
Full Name (Last, First, Middle Initial) Dr. Gene Han Mailing Address 24 Briarcliff Rd			Date of Receipt
Maining Additions 24 Briandini Flu	06 22 2010		
City	State	Zip Code	Transaction ID: 35442160
<u>Tenafly</u>	NJ	07670-2902	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.23
Name of Employer Hackensack Radiology Group		ic Radiologist	
Receipt For:  Primary  General	Aggregate	e Year-to-Date ▼	_
Primary General Other (specify) ▼		230.76	
Full Name (Last, First, Middle Initial) Dr. Robert Krugman	<b>'</b>		Date of Receipt
Mailing Address 10 Lexington Ct			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State	Zip Code	Transaction ID: 35442161
Englewood	NJ	07631-3081	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.23
Name of Employer Hackensack Radiology Group	<del>_ , ' _ · _ · _ </del>	ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 230.76	
	<u> </u>		57.69

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 45 / 125 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	d Statements may no the name and addre	ot be sold or used by any persons of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Ass	ociation Political	Action Committee	
Full Name (Last, First, Middle Initial) Dr. Gail Starr			Date of Receipt
Mailing Address Hackensack Univ N 20 Prospect Ave Ste			06 22 2010
City	State	Zip Code	Transaction ID: 35442163
<u>Hackensack</u>	NJ	07601-1962	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnostic	Radiologist	
Receipt For:		ear-to-Date ▼	7
Primary General Other (specify) ▼		230.76	
Full Name (Last, First, Middle Initial) Dr. Gregory Nicola			Date of Receipt
Mailing Address 101 W End Ave Apr	: 16H		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35442164
New York	NY	10023-6337	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		19.23
Name of Employer Hackensack Radiology Group	Occupation Diagnostic	Radiologist	7
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 230.76	
Full Name (Last, First, Middle Initial) Dr. Raymond Thomas			Date of Receipt
Mailing Address Florence Radiologic 515 Rosewood Driv			06 22 7 2010
City	State	Zip Code	Transaction ID: 35442165
Florence	SC	29501-5455	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		62.50
Name of Employer Florence Radiological Ass- ociates	Occupation Diagnostic	Radiologist	7
Receipt For:	Aggregate Ye	ear-to-Date ▼	7
Primary General Other (specify) ▼		375.00	]
SUBTOTAL of Receipts This Page (optiona	l)		100.96

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 46 / 125 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any per e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ	iation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Samuel Hill, IV		Date of Receipt
Mailing Address 1860 Houndsfield Dr	Ohada Zin Ohada	06 22 2010
City Florence	State Zip Code SC 29506-8552	Transaction ID: 35442284  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	62.50
Name of Employer Florence Radiological Associates, P.A. Receipt For:	Occupation Diagnostic Radiologist  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	375.00	
Full Name (Last, First, Middle Initial) Dr. Kent Thompson		Date of Receipt
Mailing Address PO Box 1643		06 22 2010
City	State Zip Code	Transaction ID: 35443762
Rancho Santa Fe	CA 92067-1643	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer La Jolla Radiology Medical Group	Occupation Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	_
Other (specify)	250.00	
Full Name (Last, First, Middle Initial) Dr. Brian Shore		Date of Receipt
Mailing Address 3795 Derby Bluffs Wa	у	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State Zip Code	Transaction ID: 35443763
San Diego	CA 92130-5101	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer La Jolla Radiology Medical	Occupation	
Group Receipt For:	Diagnostic Radiologist  Aggregate Year-to-Date ▼	
Primary General		7
Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)		562.50
		_

City State Zip Code CA 92011-4692  FEC ID number of contributing federal political committee.  Name of Employer La Jolia Radiology Medical Group Receipt For:  Primary Other (specify) ▼  State Zip Code CA 92130-8663  FEC ID number of contributing federal political committee.  Full Name (Last, First, Middle Initial) Dr. Lida Chaipat  Mailing Address 4337 Corte De Sausalito  City San Diego  FEC ID number of contributing federal political committee.  Name of Employer La Jolia Radiology Medical Group Receipt For: Q State Zip Code CA 92130-8663  FEC ID number of contributing federal political committee.  C  Name of Employer La Jolia Radiology Medical Group Receipt For: Q Primary Q General Other (specify) ▼  Full Name (Last, First, Middle Initial) Dr. Larry De St Jeor  Mailing Address 549 E Mallard Cir  City State Zip Code CA 93720-1228  Transaction ID: 35443765  Amount of Each Receipt this Perio  Date of Receipt  Transaction ID: 35443765  Date of Receipt  Transaction ID: 35443765  Amount of Each Receipt this Perio  Transaction ID: 35443765  Amount of Each Receipt this Perio  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perio  Transaction ID: 35443779  Amount of Each Receipt this Perio	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 125 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
A. Dr. Ratana Bhardval  Mailing Address 7390 Escallonia Ct  City State Zip Code Carlsbad CA 92011-4692  FEC ID number of contributing federal political committee.  Name of Employer La Joila Radiology Medical Group FEC ID number of contributing General Other (specify) ▼ State Zip Code CA 92130-8663  FUI Name (Last, First, Middle Initial) Dr. Lida Chaipat  Mailing Address 4337 Corte De Sausalito  City State Zip Code CA 92130-8663  FEC ID number of contributing federal political committee.  Name of Employer La Joila Radiology Medical Group Receipt For: Primary General Other (specify) ▼ Date of Receipt  City State Zip Code CA 92130-8663  FEC ID number of contributing federal political committee.  Name of Employer La Joila Radiology Medical Group Receipt For: Primary General Other (specify) ▼ Date of Receipt  Date of Receipt  Date of Receipt  Transaction ID: 35443765  Amount of Each Receipt this Perio  250.00  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perio  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perio  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perio  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perio  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perio  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perio  Transaction ID: 35443779  Amount of Each Receipt this Perio  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perio  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perio  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perio  Date of Receipt  Transaction ID: 35443779  Transaction ID: 35443779  Amount of Each Receipt this Perio  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perio	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	he name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Group Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Dr. Lida Chaipat Mailing Address 4337 Corte De Sausalito  City San Diego CA 92130-8663 FEC ID number of contributing federal Other (specify) ▼  Cocupation Diagnostic Radiologist Receipt For:  Primary General  Date of Receipt  Transaction ID: 35443765  Amount of Each Receipt this Perior  Aggregate Year-to-Date ▼  Transaction ID: 35443765  Amount of Each Receipt this Perior  Primary General  Date of Receipt  Date of Receipt  Transaction ID: 35443765  Amount of Each Receipt this Perior  Primary General  Date of Receipt  Transaction ID: 35443765  Amount of Each Receipt this Perior  Diagnostic Radiologist  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perior  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perior  Primary General  C  State Zip Code  Transaction ID: 35443779  Transaction ID: 35443779  Amount of Each Receipt this Perior  Primary General	Mailing Address 7390 Escallonia Ct  City  Carlsbad  FEC ID number of contributing federal political committee.	CA 92011-4692	06 22 7 2010
Date of Receipt  Mailing Address 4337 Corte De Sausalito  City State Zip Code San Diego CA 92130-8663  FEC ID number of contributing federal political committee.  Name of Employer La Jolia Radiology Medical Group Receipt For: Primary General Other (specify) ▼  City State Zip Code Diagnostic Radiologist Aggregate Year-to-Date ▼  Full Name (Last, First, Middle Initial) Dr. Larry De St Jeor Mailing Address 549 E Mallard Cir  City State Zip Code CA 93720-1228  FEC ID number of contributing federal political committee.  City State Zip Code CA 93720-1228  FEC ID number of contributing federal political committee.  Name of Employer Sierra Imaging Associates  Receipt For: Primary General  Occupation Diagnostic Radiologist Aggregate Year-to-Date ▼  Transaction ID: 35443779  Amount of Each Receipt this Perior  Ca 93720-1228  Cocupation Diagnostic Radiologist  Aggregate Year-to-Date ▼  Primary General	Group Receipt For:  Primary General  Other (specify) ▼	Diagnostic Radiologist  Aggregate Year-to-Date ▼  250.00	
City State Zip Code CA 92130-8663  FEC ID number of contributing federal political committee.  Name of Employer La Jolla Radiology Medical Group Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Dr. Larry De St Jeor Mailing Address 549 E Mallard Cir  City State Zip Code Transaction ID: 35443779  FCC ID number of contributing federal political committee.  C State Zip Code Transaction ID: 35443779  FCC ID number of contributing federal political committee.  C State Zip Code Transaction ID: 35443779  Amount of Each Receipt this Perior Capacity State Receipt For:  Primary General Diagnostic Radiologist	Dr. Lida Chaipat	alito	M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.    Name of Employer La Jolla Radiology Medical Group   Diagnostic Radiologist	City	State Zip Code	Transaction ID: 35443765
La Jolla Hadiology Medical Group Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Dr. Larry De St Jeor Mailing Address 549 E Mallard Cir  City State Zip Code Fresno CA 93720-1228  FEC ID number of contributing federal political committee.  Name of Employer Sierra Imaging Associates  Receipt For: Primary General  Diagnostic Radiologist  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: 35443779  Amount of Each Receipt this Perior  250.0	FEC ID number of contributing		Amount of Each Receipt this Period 250.00
Dr. Larry De St Jeor  Mailing Address 549 E Mallard Cir  City State Zip Code Fresno CA 93720-1228  FEC ID number of contributing federal political committee.  Name of Employer Sierra Imaging Associates  Receipt For: Primary General  Date of Receipt  M M D D D Q 2 2 0 1  Transaction ID: 35443779  Amount of Each Receipt this Period  250.0	La Jolla Radiology Medical Group Receipt For: Primary General	Diagnostic Radiologist  Aggregate Year-to-Date ▼	
City State Zip Code Transaction ID: 35443779  Fresno CA 93720-1228  FEC ID number of contributing federal political committee.  Name of Employer Sierra Imaging Associates  Receipt For: Primary General  O 6 2 2 2 0 1  Transaction ID: 35443779  Amount of Each Receipt this Period  250.0	, , , ,		Date of Receipt
City State Zip Code CA 93720-1228  FEC ID number of contributing federal political committee.  C	Mailing Address 549 E Mallard Cir		
FEC ID number of contributing federal political committee.  Name of Employer Sierra Imaging Associates  Primary  General  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date	City	State Zip Code	
federal political committee.  Name of Employer Sierra Imaging Associates  Occupation Diagnostic Radiologist  Receipt For:  Primary General  Aggregate Year-to-Date ▼	Fresno	CA 93720-1228	Amount of Each Receipt this Period
Sierra Imaging Associates  Diagnostic Radiologist  Receipt For:  Primary General  Aggregate Year-to-Date ▼		C	250.00
Primary General	Sierra Imaging Associates	Diagnostic Radiologist	
	Primary General		
SUBTOTAL of Receipts This Page (optional)	SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 125 (check only one)    X   11a
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Assoc	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
, , , , , , , , , , , , , , , , , , , ,		ar Action Committee	
Full Name (Last, First, Middle Initial) Dr. Paul Sylvan			Date of Receipt
Mailing Address La Jolla Rad Med Grp 10150 Sorrento Valley			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City	State	Zip Code	Transaction ID: 35443780
San Diego	CA	92121-1614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer La Jolla Radiology Medical	Occupation	n ic Radiologist	
Group Receipt For:	, i	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	250.00	]
Full Name (Last, First, Middle Initial) Dr. George Wesbey, III			Date of Receipt
Mailing Address La Jolla Rad Med Grp 10150 Sorrento Valley			0 6 2 2 Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35443781
San Diego	CA	92121-1614	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer La Jolla Radiology Medical Group	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) Dr. Donald Frush	1		Date of Receipt
Mailing Address 610 Patrick Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35443782
Bahama	NC	27503-8717	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Duke Univ Med Ctr	Occupation Diagnost	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
	1		750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 125 (check only one)    X
	ny information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Association	e name and ado	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) Dr. Terry P. Prince			Date of Receipt
۹.	Mailing Address 717 S Columbus Boul	levard Apt. 8	01	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 35466198
	<u>Philadelphia</u>	PA	19147-3510	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer U of Miami-Jackson Memori- al Hosp Receipt For:	,	n ric Radiologist e Year-to-Date ▼	
	Primary General Other (specify) ▼	0 0	250.00	]
- 3.	Full Name (Last, First, Middle Initial) Dr. Philip Strobl			Date of Receipt
	Mailing Address 30 Alexander Dr			06 28 2010
	City	State	Zip Code	Transaction ID: 35476027
	Williamstown	WV	26187-8302	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Roentgen Diagnostics	Occupatio Diagnost	n iic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	]
	Full Name (Last, First, Middle Initial) Dr. Katherine Shaffer			Date of Receipt
	Mailing Address Froedtert Mem Luther 9200 W Wisconsin Av	/e .		06 30 2010
	City <u>Milwaukee</u>	State WI	Zip Code 53226-3596	Transaction ID: 35602495  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Medical College of Wisons- in	<del>- '</del>	ic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional) .			800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 125 (check only one)  X 11a 11b 11c 12  13 14 15 16 11		
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ne name and address of any political committee to	n for the purpose of soliciting contributions		
American College of Radiology Asso	ciation Political Action Committee			
Full Name (Last, First, Middle Initial) Dr. Kathleen Draths-Hanson Mailing Address 751 Riford Rd		Date of Receipt		
City	State Zip Code	0 6 3 0 2 0 1 0 Transaction ID: 35602496		
Glen Ellyn	IL 60137-3950	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	200.00		
Name of Employer Midwest Imaging Specialis- ts	Occupation Diagnostic Radiologist			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00			
Full Name (Last, First, Middle Initial) Dr. Robert Rhodes, III		Date of Receipt		
Mailing Address 1041 Maple Ct		0 6 3 0 2 0 1 0  Transaction ID: 35602497		
City				
Athens	GA 30606-5746	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	125.00		
Name of Employer Athens Radiology Associat- es	Occupation Diagnostic Radiologist			
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00			
Full Name (Last, First, Middle Initial) Dr. C Smith		Date of Receipt		
Mailing Address 124 W Lake Ct		06 30 7 2010		
City	State Zip Code	Transaction ID: 35602498		
Athens	GA 30606-4655	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	125.00		
Name of Employer Athens Radiology Associat- es	Occupation Diagnostic Radiologist			
Receipt For:	Aggregate Year-to-Date ▼			
Primary General Other (specify) ▼	250.00			
SUBTOTAL of Receipts This Page (optional)		450.00		
TOTAL This Period (last page this line number	<u> </u>			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 125 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Radiology Asset	d Statements may not be sold or used by any perso the name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Curtis Poor Mailing Address 2415 Eagle Cir  City Bettendorf  FEC ID number of contributing federal political committee.  Name of Employer Radiology Group PC SC  Receipt For: Primary General Other (specify)	State Zip Code IA 52722-6202  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 35602499  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Dr. Sean Theisen Mailing Address 1346 Whispering Ma City Ann Arbor FEC ID number of contributing federal political committee.  Name of Employer Huron Valley Radiology Receipt For:	aples Ct  State Zip Code MI 48108-2492  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 3 0 2 0 1 0  Transaction ID: 35602500  Amount of Each Receipt this Period  500.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Dr. Mark Yuhasz Mailing Address Tacoma Radiologica PO Box 1535  City Tacoma  FEC ID number of contributing federal political committee.  Name of Employer Tacoma Radiology Associat-	al Associates  State Zip Code WA 98401-1535  C	Date of Receipt  M M M / D D / Y Y Y Y Y  0 6 3 0 2 0 1 0  Transaction ID: 35602501  Amount of Each Receipt this Period  250.00
Tacoma Hadiology Associates  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	Diagnostic Radiologist  Aggregate Year-to-Date ▼  500.00	1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 125 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American College of Radiology Ass	d Statements may not be sold or used by any person the name and address of any political committee to ociation Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Michael Shick		Date of Receipt
Mailing Address 2921 Crossfield Dr  City	State Zip Code	0 6 3 0 2 0 1 0 Transaction ID: 35602503
Greensboro	NC 27408-6743	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Wake Forest Univ Baptist Med C	Occupation Diagnostic Radiologist	
Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 250.00	]
Full Name (Last, First, Middle Initial) Dr. Leonard Zawodniak Mailing Address 1439 Garrett Dr		Date of Receipt
	06 30 2010	
City	State Zip Code	Transaction ID: 35602511
Wall Township	NJ 07719-9648	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer Jersey Shore Radiology As- sociates	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  240.00	
Full Name (Last, First, Middle Initial) Dr. Michael Brannon		Date of Receipt
Mailing Address 7 Foxglove Ct		06 30 2010
City	State Zip Code	Transaction ID: 35602512
Greenville	SC 29615-5505	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Greenville Radiology	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	
SUBTOTAL of Receipts This Page (optiona		207.00

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SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 53 / 125
ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	(check only one)
II EMIZED RECEIP 13			X 11a 11b 11c 12
			13 14 15 16 17
Any information copied from such Reports and Stator for commercial purposes, other than using the r	atements may name and add	not be sold or used by any perso ress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
American College of Radiology Associa	ation Politica	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Hu			Date of Receipt
Mailing Address 302 Topwater Ln			06 30 7 2010
City	State	Zip Code	Transaction ID: 35602513
Greensboro	NC	27455-3423	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		60.00
Name of Employer Greensboro Radiology	Occupation Diagnosti	c Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General			1
Other (specify) ▼	0 0	360.00	
Full Name (Last, First, Middle Initial) Dr. Edward Sullivan, III			Date of Receipt
Mailing Address Radiology Assoc of Birr 2090 Columbiana Rd S			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35602515
<u>Birmingham</u>	AL	35216-2153	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		40.00
Name of Employer Radiology Associates of Birmingham	Occupation Diagnosti	c Radiologist	
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General	00 0	040.00	1
Other (specify) ▼		240.00	
Full Name (Last, First, Middle Initial) Dr. Howard Bear			Date of Receipt
Mailing Address 4931 Pearlman Way			06 30 / Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35602517
San Diego	CA	92130-2789	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.			50.00
Name of Employer San Diego Imaging Medical	Occupation		
Group		c Radiologist	_
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		300.00	
☐ Other (specify) ▼	0 0		1
SUBTOTAL of Receipts This Page (optional)			150.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 54 / 125 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Associations and the commercial purposes, other than using the commercial purposes.	e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. James Webb  Mailing Address 9132 E 101st PI  City Tulsa  FEC ID number of contributing federal political committee.  Name of Employer Univ of Oklahoma Health Sci Ctr  Receipt For: Primary General Other (specify)	State Zip Code OK 74133-6912  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date  750.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Martin Schwartz  Mailing Address Radiology Associates 2090 Columbiana Rd  City Birmingham  FEC ID number of contributing federal political committee.  Name of Employer Radiology Associates of Birmingham, PC Receipt For:  Primary General Other (specify)		Date of Receipt  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Richard Redvanly  Mailing Address 4315 Gosford PI  City Charlotte  FEC ID number of contributing federal political committee.  Name of Employer Charlotte Radiology  Receipt For:  Primary General Other (specify)	State Zip Code NC 28277-4546  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date  366.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .		390.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 125 (check only one)    X   11a
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Radiology As:	the name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Jeffrey Jaindl			Date of Receipt
Mailing Address 939 Quarter Round	Road		06 30 7 2010
City	State	Zip Code	Transaction ID: 35602526
Pacolet  FEC ID number of contributing federal political committee.	SC	29372-3516	Amount of Each Receipt this Period  100.00
Name of Employer Greenville Radiology, P.A.		tic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Deborah Agisim  Mailing Address 5600 Laurium Rd			Date of Receipt
			06 30 2010
City	State	Zip Code	Transaction ID: 35602528
Charlotte  FEC ID number of contributing federal political committee.	C	28226-5610	Amount of Each Receipt this Period 40.00
Name of Employer Charlotte Radiology	Occupation Diagnos	on tic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	
Full Name (Last, First, Middle Initial) Dr. Mark Wittry			Date of Receipt
Mailing Address 10525 Concord Sci	nool Rd		06 30 2010
City	State	Zip Code	Transaction ID: 35602530
Saint Louis	MO	63128-1232	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		85.00
Name of Employer West County Radiological Group, Inc.	Occupation Cardiac	n Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 510.00	
	<u> </u>		225.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 125 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American College of Radiology Associations	I Statements may not be sold or used by any person the name and address of any political committee to ociation Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Mary Pomeroy Mailing Address 2625 Rolling Hills Dr  City Monroe  FEC ID number of contributing federal political committee.  Name of Employer Charlotte Radiology  Receipt For: Primary General	State Zip Code NC 28110-8408  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y Y  O 6 3 0 2 0 1 0  Transaction ID: 35602531  Amount of Each Receipt this Period  42.00
Full Name (Last, First, Middle Initial) Dr. Mark Alson Mailing Address 6641 N Forkner Ave  City Fresno FEC ID number of contributing federal political committee.	378.00  State Zip Code CA 93711-1326  C	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Sierra Imaging Associates  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation Diagnostic Radiologist  Aggregate Year-to-Date   375.00	
Full Name (Last, First, Middle Initial) Dr. Alfred Mansour, JR  Mailing Address Central LA Imaging I 3704 North Blvd Ste  City  Alexandria  FEC ID number of contributing federal political committee.  Name of Employer Central LA Imaging Inc.	A State Zip Code LA 71301-3606  C Occupation	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼	Diagnostic Radiologist  Aggregate Year-to-Date ▼  500.04	
SUBTOTAL of Receipts This Page (optional)	· • • • • • • • • • • • • • • • • • • •	175.34

Any information copied from such Reports and		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Asso	ne name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Eric Sax Mailing Address 9 Old Sudbury Rd  City Lincoln	State MA	Zip Code 01773-4807	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.	C	01775-4007	Amount of Each Receipt this Period 83.34
Name of Employer The Imaging Institute  Receipt For:  Primary  General  Other (specify) ▼	_ <del>, '</del>	n cic Radiologist e Year-to-Date ▼ 500.04	
Full Name (Last, First, Middle Initial) Dr. Amy Kirby  Mailing Address 5209 Pulchella Dr	1		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35602542
Oklahoma City  FEC ID number of contributing federal political committee.	C	73142-6811	Amount of Each Receipt this Period  200.00
Name of Employer Eagle Eye Imaging Receipt For:		n y Resident e Year-to-Date ▼	
Primary General Other (specify) ▼		1300.00	
Full Name (Last, First, Middle Initial) Dr. William Ketcham, II  Mailing Address 8824 Wildflower Dr			Date of Receipt
City	State	Zip Code	06 30 2010
City <u>Cheyenne</u>	State WY	82009-1215	Transaction ID: 35602543  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer Baylor College of Medicine		ic Radiologist	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional)			323.34

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any personal the name and address of any political committee to sociation Political Action Committee	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Arthur Sandy Mailing Address 2821 Argyle Rd  City Birmingham  FEC ID number of contributing federal political committee.  Name of Employer Advanced Imaging Assoc of AL	State Zip Code AL 35213-3403  C  Occupation Diagnostic Radiologist	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial)	Aggregate Year-to-Date ▼ 600.00	]
Dr. Jeffrey Goree  Mailing Address 2320 Cromwell Cir  City  Davenport  FEC ID number of contributing federal political committee.  Name of Employer Radiology Group, P.C.  Receipt For:  Primary  General  Other (specify)	State Zip Code IA 52807-2833  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date   1200.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 3 0 Y 2 0 1 0  Transaction ID: 35605143  Amount of Each Receipt this Period  600.00
Full Name (Last, First, Middle Initial) Dr. Janet Storella Mailing Address 6515 Fallwind Ln  City Bethesda  FEC ID number of contributing federal political committee.  Name of Employer Drs Grover, Christie & Merritt Receipt For: Primary General Other (specify)	State Zip Code MD 20817-4941  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date  480.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 35605144  Amount of Each Receipt this Period  40.00
SUBTOTAL of Receipts This Page (optional	l)	740.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 125 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and add	Ly not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ciation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. John Baden			Date of Receipt
Mailing Address 9601 Lile Dr Ste 1100	0		06 30 7 2010
City	State	Zip Code	Transaction ID: 35605145
Little Rock	AR	72205-6333	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Consultants of	Occupation	n ic Radiologist	
Little Rock Receipt For:	_ · · · · ·	e Year-to-Date	
Primary General	Aggregate		1
Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Dr. Amanda Ferrell	1		Date of Receipt
Mailing Address 1606 Blair St			06 30 2010
City	State	Zip Code	Transaction ID: 35605146
Little Rock	AR	72207-5302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Consultants of Little Rock	Occupation Diagnost	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Kevin Forte			Date of Receipt
Mailing Address Radiology Consultant 9601 Lile Dr Ste 1100			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35605147
Little Rock	AR	72205-6333	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Radiology Consultants of Little Rock	Occupation Diagnost	n ic Radiologist	7
Receipt For:	<del>_ ' _ ` </del>	e Year-to-Date ▼	
Primary General Other (specify) ▼	33.334.6	250.00	]
SUBTOTAL of Receipts This Page (optional)			625.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 60 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Association	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Clinton Fuller, III  Mailing Address 9601 Lile Dr Ste 1100  City Little Rock  FEC ID number of contributing federal political committee.  Name of Employer Radiology Consultants of Little Rock Receipt For: Primary General Other (specify)	, <del>'</del>	Zip Code 72205-6333  n cic Radiologist e Year-to-Date  ▼ 250.00	Date of Receipt  M M M J D D J Y Y Y Y Y  O 6 3 0 2 0 1 0  Transaction ID: 35605149  Amount of Each Receipt this Period  125.00
Full Name (Last, First, Middle Initial) Dr. Scott Harter  Mailing Address 55 Maisons Dr  City Little Rock  FEC ID number of contributing federal political committee.  Name of Employer Radiology Consultants of Little Rock  Receipt For: Primary General Other (specify)	,	Zip Code 72223-9020	Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 3 0 2 0 1 0  Transaction ID: 35605150  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Dr. David Hays  Mailing Address 18 Farnham Loop  City  Little Rock  FEC ID number of contributing federal political committee.  Name of Employer Radiology Consultants of Little Rock  Receipt For:  Primary General Other (specify)	<del> </del>	Zip Code 72223-9199  n cic Radiologist 2 Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 35605151  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)			625.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	Use separate sch for each category Detailed Summary	of the Collect Gilly Gile)
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used I he name and address of any political c	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American College of Radiology Asso	ociation Political Action Committ	ee
Full Name (Last, First, Middle Initial) Dr. Michael King  Mailing Address Rad Consultants of	ittle Bock	Date of Receipt
9601 Lile Dr Ste 110		06 30 2010
City	State Zip Code	Transaction ID: 35605152
Little Rock	AR 72205-6333	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Consultants of Little Rock	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5	00.00
Full Name (Last, First, Middle Initial) Dr. David Kolb	1	Date of Receipt
Mailing Address 25 Talais Dr		0 6 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35605153
Little Rock	AR 72223-9129	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Consultants of Little Rock	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5	00.00
Full Name (Last, First, Middle Initial) Dr. Ronald J. Martin		Date of Receipt
Mailing Address 110 Buckland PI		0 6 3 0 Y Y Y Y Y
City	State Zip Code	Transaction ID: 35605162
Little Rock	AR 72223-4567	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Radiology Consultants of Little Rock	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	5	00.00
		750.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	fo	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 125 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Radiology Ass	the name and address	s of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Joseph Murphy Mailing Address 48 Hickory Hills Cir			Date of Receipt
City <u>Little Rock</u> FEC ID number of contributing	State AR	Zip Code 72212-2766	7 Transaction ID: 35605163  Amount of Each Receipt this Period  250.00
Name of Employer Radiology Consultants of Little Rock Receipt For: Primary General Other (specify)	Occupation Diagnostic R Aggregate Yea		]
Full Name (Last, First, Middle Initial) Dr. Steven Nokes  Mailing Address Radiology Consultal 9601 Lile Dr Ste 110	00		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Little Rock</u> FEC ID number of contributing federal political committee.	State AR	Zip Code 72205-6333	Transaction ID: 35605164  Amount of Each Receipt this Period  250.00
Name of Employer Radiology Consultants of Little Rock Receipt For: Primary General Other (specify)	Occupation Diagnostic R Aggregate Yea		
Full Name (Last, First, Middle Initial) Dr. W Dale Perrymore  Mailing Address 6 Courts Dr			Date of Receipt
City <u>Little Rock</u> FEC ID number of contributing federal political committee.	State AR	Zip Code 72223-9021	Transaction ID: 35605165  Amount of Each Receipt this Period  250.00
Name of Employer Radiology Consultants of Little Rock Receipt For:  Primary General Other (specify) ▼	Occupation Diagnostic R Aggregate Yea		1
SUBTOTAL of Receipts This Page (optional	)		750.00

Ar or			category of the Summary Page	(check only one)       X     11a     11b     11c     12       13     14     15     16     1
	ny information copied from such Reports and S for commercial purposes, other than using the	atements may not be sold name and address of any p	or used by any perso political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American College of Radiology Associ	ation Political Action C	ommittee	
۸.	Full Name (Last, First, Middle Initial) Dr. Kenneth Robbins			Date of Receipt
	Mailing Address Radiology Consultants 9601 Lile Dr Ste 1100			06 30 2010
	City Little Rock	State Zip Cod AR 72205-		Transaction ID: 35605166  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Radiology Consultants of Little Rock+ Receipt For:  Primary  General  Other (specify) ▼	Occupation Diagnostic Radiolog Aggregate Year-to-Date		
 3.	Full Name (Last, First, Middle Initial) Dr. Martin Robinson  Mailing Address 1515 Wetherhorne Dr.			Date of Receipt
	Mailing Address 1515 Wetherborne Dr			06 30 7 2010
	City Little Rock	State Zip Cod AR 72211-		Transaction ID: 35605170
	FEC ID number of contributing federal political committee.	C 72211-	0125	Amount of Each Receipt this Period  125.00
	Name of Employer Radiology Consultants of Little Rock	Occupation Diagnostic Radiolog	gist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	250.00	
	Full Name (Last, First, Middle Initial) Dr. Thomas St Amour			Date of Receipt
	Mailing Address 14116 Belle Pointe Dr			0 6 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Cod		Transaction ID: 35605171
	Little Rock  FEC ID number of contributing federal political committee.	AR 72212-	3697	Amount of Each Receipt this Period  250.00
	Name of Employer Radiology Consultants of Little Rock	Occupation Diagnostic Radiolog	gist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	500.00	
s	SUBTOTAL of Receipts This Page (optional)			625.00

SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 125 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may the name and add	not be sold or used by any persol dress of any political committee to	
NAME OF COMMITTEE (In Full)  American College of Radiology Ass	ociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Todd Smith			Date of Receipt
Mailing Address 18 Masters Cir			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35605172
Little Rock	AR	72212-3304	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Consultants of	Occupation		
Little Rock Receipt For:		ic Radiologist • Year-to-Date ▼	—
Primary General	Aggregate	rear-to-Date ▼	7
Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) Dr. Robert Stuckey			Date of Receipt
Mailing Address 216 Buckland Cir			0 6 3 0 2 0 1 0
City	State	Zip Code	Transaction ID: 35605173
Little Rock	AR	72223-4534	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Consultants of Little Rock	Occupation Diagnost	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Dr. Alan Williams			Date of Receipt
Mailing Address 55 Robinwood Dr			0 6 3 0 Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35605174
Little Rock	AR	72227-2238	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Radiology Consultants of Little Rock	Occupation Diagnost	n ic Radiologist	
Receipt For:	<del>''</del>	Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	]
			750.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 65 / 125 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any perso g the name and address of any political committee to esociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Ross Bellavia  Mailing Address 8618 Longview Clu  City  Waxhaw  FEC ID number of contributing federal political committee.  Name of Employer Charlotte Radiology	State Zip Code NC 28173-6821  C Occupation	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Receipt For:  Primary General  Other (specify) ▼  Full Name (Last, First, Middle Initial)	Diagnostic Radiologist  Aggregate Year-to-Date ▼  252.00	
Dr. Christina Chaconas  Mailing Address 3908 Foxcroft Rd  City  Charlotte	State Zip Code NC 28211-3757	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Charlotte Radiology  Receipt For: Primary General Other (specify)	Occupation Diagnostic Radiologist  Aggregate Year-to-Date   252.00	126.00
Full Name (Last, First, Middle Initial) Dr. C Chang Mailing Address 7113 Fairway Vista	a Dr	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Charlotte  FEC ID number of contributing federal political committee.	State Zip Code NC 28226-6870	Transaction ID: 35605178  Amount of Each Receipt this Period  126.00
Name of Employer Charlotte Radiology, P.A.  Receipt For:  Primary General  Other (specify) ▼	Occupation Diagnostic Radiologist  Aggregate Year-to-Date   252.00	
SUBTOTAL of Receipts This Page (option	al)	378.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 125 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any per e name and address of any political committee	
NAME OF COMMITTEE (In Full)  American College of Radiology Assor	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Jonathan Clemente		Date of Receipt
Mailing Address 1620 Biltmore Drive  City	State Zip Code	0 6 3 0 2 0 1 0  Transaction ID: 35605179
Charlotte	NC 28207-2612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 2020, 2012	126.00
Name of Employer NYU/Bellevue/VA Medical Center	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 252.00	
Full Name (Last, First, Middle Initial) Dr. Gary De Filipp Mailing Address Charlotte Radiology F	PA	Date of Receipt
PO Box 36937		06 30 2010
City	State Zip Code	Transaction ID: 35605181
<u>Charlotte</u>	NC 28236-6937	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	126.00
Name of Employer Charlotte Radiology PA	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	252.00	
Full Name (Last, First, Middle Initial) Dr. Matthew Gromet		Date of Receipt
Mailing Address Charlotte Radiology F 3030 Latrobe Dr	PA	06 30 7 2010
City	State Zip Code	Transaction ID: 35605182
Charlotte	NC 28211-4866	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	126.00
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	
SUBTOTAL of Receipts This Page (optional)	1	378.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate for each cate Detailed Sum	gory of the	FOR LINE NUMBER: PAGE 67 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Fall)	Statements may not be sold or une name and address of any polit	ised by any person ical committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American College of Radiology Asso	ciation Political Action Com	mittee	
Full Name (Last, First, Middle Initial) Dr. Olin Harbury			Date of Receipt
Mailing Address Charlotte Radiology 3030 Latrobe Dr			06 30 2010
City	State Zip Code		Transaction ID: 35605183
<u>Charlotte</u>	NC 28211-486	7	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		126.00
Name of Employer Mercy Hospital	Occupation Diagnostic Radiologist		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date	252.00	
Full Name (Last, First, Middle Initial) Dr. Scott Hees			Date of Receipt
Mailing Address 119 Saint Mellions			06 30 2010
City	State Zip Code		Transaction ID: 35605184
Pinehurst	NC 28374-810	4	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		126.00
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	252.00	
Full Name (Last, First, Middle Initial) Dr. Brian Howard			Date of Receipt
Mailing Address 6632 Summer Darby	Lane		06 30 2010
City	State Zip Code		Transaction ID: 35605187
Charlotte	NC 28270-281	1	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		126.00
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	252.00	
SUBTOTAL of Receipts This Page (optional)	•	<b>)</b>	378.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line numb		<u> </u>	378.

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 125 (check only one)    X
	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Associ	name and ad	dress of any political committee to	on for the purpose of soliciting contributions
<b>A</b> .	Full Name (Last, First, Middle Initial) Dr. John D. Howard  Mailing Address Charlotte Radiology PO Box 36937			Date of Receipt  0 6 3 0 2 0 1 0
	City Charlotte  FEC ID number of contributing federal political committee.	State NC	Zip Code 28236-6937	Transaction ID: 35605188  Amount of Each Receipt this Period  126.00
	Name of Employer Charlotte Radiology  Receipt For:  Primary General  Other (specify) ▼	<del></del>	n tic Radiologist e Year-to-Date ▼ 252.00	
В.	Full Name (Last, First, Middle Initial) Dr. Jeremy Jones  Mailing Address 1644 Windy Ridge Rd			Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 35605189
	Charlotte FEC ID number of contributing federal political committee.	NC C	28270-1107	Amount of Each Receipt this Period  126.00
	Name of Employer Mount Sinai Medical Center	Occupatio Diagnost	n tic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 252.00	
с. С.	Full Name (Last, First, Middle Initial) Dr. Michael Kelley			Date of Receipt
	Mailing Address 2500 Maynard Rd			0 6 3 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City <u>Charlotte</u>	State NC	Zip Code	Transaction ID: 35605190
	FEC ID number of contributing federal political committee.	C	28270-0754	Amount of Each Receipt this Period  126.00
	Name of Employer Charlotte Radiology	Occupatio Diagnost	n tic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 252.00	
	SUBTOTAL of Receipts This Page (optional)			378.00
	TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC For ITEMIZED RECEIPTS	m 3X)  Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 125 (check only one)    X
or for commercial purposes, other that NAME OF COMMITTEE (In Full)	ports and Statements may not be sold or used by any person using the name and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initi Dr. Peter Kravath Mailing Address 127 N Tryon	<u>'</u>	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City Charlotte	State         Zip Code           NC         28202-1107	Transaction ID: 35605191  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	Convention	126.00
Name of Employer Charlotte Radiology  Receipt For:  Primary  General  Other (specify) ▼	Occupation Diagnostic Radiologist  Aggregate Year-to-Date   252.00	
Full Name (Last, First, Middle Initi Dr. Fred Lassiter  Mailing Address Charlotte Ra PO Box 3693	diology	Date of Receipt    M   M   D   D   V   Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: 35605193
Charlotte	NC 28236-6937	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	126.00
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	
Full Name (Last, First, Middle Initi Dr. Barry McGinnis	al)	Date of Receipt
Mailing Address Charlotte Ra PO Box 3693	7	06 / 30 / 2010
City <u>Charlotte</u>	State Zip Code NC 28236-6937	Transaction ID: 35605194  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	126.00
Name of Employer Charlotte Radiology PA	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	
SUBTOTAL of Receipts This Page	(optional)	378.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 125 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Radiology As:	g the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Robert Mittl, JR  Mailing Address 4733 Coburn Court	†		Date of Receipt
City	State NC	Zip Code	0 6 3 0 2 0 1 0 Transaction ID: 35605195
Charlotte  FEC ID number of contributing federal political committee.	C	28277-2593	Amount of Each Receipt this Period  126.00
Name of Employer Charlotte Radiology	<del>-                                    </del>	ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 462.00	
Full Name (Last, First, Middle Initial) Dr. James Oliver, III Mailing Address 4015 Winterberry F	기		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35605196
<u>Charlotte</u>	NC	28210-7329	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		126.00
Name of Employer Charlotte Radiology, P.A.	_ ,	ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	
Full Name (Last, First, Middle Initial) Dr. Mary Pomeroy	1		Date of Receipt
Mailing Address 2625 Rolling Hills [	Dr		06 30 2010
City	State	Zip Code	Transaction ID: 35605197
Monroe  FEC ID number of contributing federal political committee.	C	28110-8408	Amount of Each Receipt this Period  126.00
Name of Employer Charlotte Radiology	Occupation Diagnost	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 504.00	
SUBTOTAL of Receipts This Page (options			378.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 125 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Radiology Ass	d Statements may not be sold or used by any perso the name and address of any political committee to ociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Richard Redvanly Mailing Address 4315 Gosford PI  City Charlotte  FEC ID number of contributing federal political committee.  Name of Employer Charlotte Radiology  Receipt For: Primary General Other (specify)	State Zip Code NC 28277-4546  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 35605199  Amount of Each Receipt this Period  126.00
Full Name (Last, First, Middle Initial) Dr. Andrew Schneider Mailing Address Charlotte Radiology 3030 Latrobe Dr City Charlotte  FEC ID number of contributing federal political committee.  Name of Employer Charlotte Radiology, P.A.  Receipt For: Primary General Other (specify)	State Zip Code NC 28211-4866  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date  252.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Rajiv Sharma Mailing Address 1228 Firethorne Clu City Waxhaw  FEC ID number of contributing federal political committee.  Name of Employer Charlotte Radiology  Receipt For: Primary General Other (specify)	b Drive  State Zip Code NC 28173-6553  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date ▼  252.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional	)	378.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Asso		son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Dale Shaw Mailing Address 3601 Sharon Rd  City Charlotte FEC ID number of contributing federal political committee.  Name of Employer Charlotte Radiology  Receipt For: Primary General	State Zip Code NC 28211-3325  C  Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify)  Full Name (Last, First, Middle Initial) Dr. Joseph Staab Mailing Address 160 Pitch Pine Ln City	State Zip Code	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Pinehurst  FEC ID number of contributing federal political committee.  Name of Employer Self-Employed	NC 28374-9217  C Occupation	Amount of Each Receipt this Period  126.00
Receipt For: Primary General Other (specify)	Diagnostic Radiologist  Aggregate Year-to-Date ▼  252.00	
Full Name (Last, First, Middle Initial) Dr. Walter Steele Mailing Address 2115 Foxcroft Woods	s Ln	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City Charlotte  FEC ID number of contributing federal political committee.	State Zip Code NC 28211-2666	Transaction ID: 35605205  Amount of Each Receipt this Period  126.00
Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 276.00	
SUBTOTAL of Receipts This Page (optional)		378.00

# SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 73 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Associations (In Full)	Statements may not be sold or used by any persone name and address of any political committee to ciation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Jeffrey Stein Mailing Address 7047 Whitemarsh Ct  City Charlotte  FEC ID number of contributing federal political committee.  Name of Employer Charlotte Radiology	State Zip Code NC 28210-4901  C  Occupation Diagnostic Radiologist	Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 3 0 2 0 1 0  Transaction ID: 35605206  Amount of Each Receipt this Period  126.00
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	
Full Name (Last, First, Middle Initial) Dr. Christopher Ullrich  Mailing Address Charlotte Radiology F PO Box 36937  City Charlotte  FEC ID number of contributing federal political committee.  Name of Employer Charlotte Radiology PA  Receipt For: Primary General Other (specify)	State Zip Code NC 28236-6937  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date  752.00	Date of Receipt  M M M / D D / Y Y Y Y Y  O 6 3 0 2 0 1 0  Transaction ID: 35605207  Amount of Each Receipt this Period  126.00
Full Name (Last, First, Middle Initial) Dr. William Carey Werthmuller  Mailing Address Charlotte Radiology PO Box 36937  City Charlotte  FEC ID number of contributing federal political committee.  Name of Employer Charlotte Radiology  Receipt For: Primary General Other (specify)	State Zip Code NC 28236-6937  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date  252.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		378.00

IT	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 125 (check only one)    X
Ai	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any per e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American College of Radiology Association	ciation Political Action Committee	
۷.	Full Name (Last, First, Middle Initial) Dr. Joel Wissing		Date of Receipt
	Mailing Address Charlotte Radiology PO Box 36937	750.4	06 30 2010
	City Charlotte	State Zip Code NC 28236-6937	Transaction ID: 35605238  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	126.00
	Name of Employer Charlotte Radiology	Occupation Diagnostic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	
	Full Name (Last, First, Middle Initial) Dr. James Zuger		Date of Receipt
	Mailing Address 6011 Bentway Dr		06 30 7 2010
	City	State Zip Code	Transaction ID: 35605239
	Charlotte	NC 28226-8052	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	126.00
	Name of Employer Charlotte Radiology PA	Occupation Diagnostic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 252.00	
_	Full Name (Last, First, Middle Initial) Dr. John Donnal		Date of Receipt
	Mailing Address Medical Ctr Rads Inc 6330 N Center Dr Ste	220	06 30 7 2010
	City	State Zip Code	Transaction ID: 35605368
	Norfolk  FEC ID number of contributing federal political committee.	VA 23502-4008	Amount of Each Receipt this Period 249.99
	Name of Employer Medical Center Radiologis- ts	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	499.98	
	SUBTOTAL of Receipts This Page (optional)	L	501.99

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  Any information copied from such Benorts are	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 125 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Lauren Granata		Date of Receipt
Mailing Address 1317 Five Point Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35605369
Virginia Beach	VA 23454-1930	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	252.00
Name of Employer Medical Center Radiologis- ts	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 504.00	
Full Name (Last, First, Middle Initial)		Date of Desciret
Dr. Michael Ho  Mailing Address Medical Cntr Rads 6330 N Center Dr S		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: 35605370
Norfolk	VA 23502-4008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	255.00
Name of Employer Medical Center Radiologis- ts. I	Occupation Diagnostic Radiologist	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 510.00	
Full Name (Last, First, Middle Initial) Dr. Yoonah Kim		Date of Receipt
Mailing Address 917 Kings Cross		0 6 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35605371
Virginia Beach	VA 23452-6230	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Medical Center Radiologis- ts, Inc	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
		807.00

SCHEDULE A (FEC Form 3) TEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 76 / 125 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	nd Statements may r the name and addre	not be sold or used by any person ess of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology Ass	sociation Political	Action Committee	
Full Name (Last, First, Middle Initial) Dr. David Kushner			Date of Receipt
Mailing Address 2020 Canal Rd			06 30 7 2010
City	State	Zip Code	Transaction ID: 35605389
Virginia Beach	VA	23451-1615	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		255.00
Name of Employer Medical Center Radiologis-	Occupation	Radiologist	
ts Receipt For:		/ear-to-Date ▼	$\dashv$
Primary General  Other (specify) ▼	Aggregate	510.00	1
Full Name (Last, First, Middle Initial) Dr. Karah Lanier			Date of Receipt
Mailing Address 1153 Sunlight Dr			06 30 7 2010
City	State	Zip Code	Transaction ID: 35605390
Chesapeake	VA	23322-7121	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer	Occupation		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	rear-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Phillip Luebbert			Date of Receipt
Mailing Address 9528 25th Bay St			0 6 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35605391
Norfolk	VA	23518-1812	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		249.99
Name of Employer Medical Center Radiologis- ts	Occupation Diagnostic	Radiologist	
Receipt For:	Aggregate Y	'ear-to-Date ▼	
Primary General Other (specify) ▼	0 0	499.98	
			654.99

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 125 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may ne name and add	not be sold or used by any personess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ	ciation Politica	Il Action Committee	
Full Name (Last, First, Middle Initial) Dr. Susan McKenzie  Mailing Address Medical Ctr Rads Inc	Dida 12		Date of Receipt
6330 N Center Dr Ste			06 30 2010
City	State	Zip Code	Transaction ID: 35605392
Norfolk	VA	23502-4008	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		249.99
Name of Employer Medical Center Radiologis-	Occupation		
ts, I	<u>-</u>	c Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 499.98	1
Full Name (Last, First, Middle Initial)	0 0	0 0 0 0 0 0 0	1
Dr. Eveleen Oleinik  Mailing Address 1021 Downshire Chas	se		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City	State	Zip Code	Transaction ID: 35605536
Virginia Beach	VA	23452-6154	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		126.00
Name of Employer Medical Center Radiologis- ts, Inc	Occupation Diagnostic	c Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 252.00	
Full Name (Last, First, Middle Initial) Dr. Adam Specht			Date of Receipt
Dr. Adam Specht  Mailing Address 3309 Chappell Pl			06 30 2010
City	State	Zip Code	Transaction ID: 35605537
Virginia Beach	VA	23452-6290	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Medical Center Radiologis- ts, Inc		c Radiologist	
Receipt For:	Aggregate 1	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	600.00	]
SUBTOTAL of Receipts This Page (optional)			675.99
TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page  d Statements may not be sold or used by any perso	FOR LINE NUMBER: PAGE 78 / 125 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American College of Radiology Ass	the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Richard Thomas Mailing Address 1037 Long Beeches	s Ave	Date of Receipt
City	State Zip Code	0 6 3 0 2 0 1 0  Transaction ID: 35605538
Chesapeake	VA 23320-0681	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.01
Name of Employer Medical Center Radiologis- ts, Inc Receipt For:  Primary  General  Other (specify) ▼	Occupation Diagnostic Radiologist Aggregate Year-to-Date  250.02	
Full Name (Last, First, Middle Initial) Dr. Marshall Weissberger Mailing Address Medical Center Rad		Date of Receipt
City Norfolk	Idg 13 Ste 220           State         Zip Code           VA         23502-4101	Transaction ID: 35605539  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	249.00
Medical Center Radiologis- ts, Inc.  Receipt For:  Primary General  Other (specify) ▼	Diagnostic Radiologist  Aggregate Year-to-Date ▼  498.00	
Full Name (Last, First, Middle Initial)  Dr. John Whitbeck		Date of Receipt
Mailing Address Medical Cntr Rads I 6330 N Center Dr S		0 6 3 0 2 0 1 0
City Norfolk	State Zip Code VA 23502-4008	Transaction ID: 35605540  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Medical Center Radiologis- ts. I	Occupation Diagnostic Radiologist	
Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional	l) <b>&gt;</b>	524.01

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 125 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Associ	name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Glenn Cook  Mailing Address Scottsdale Med Imagin 3501 N Scottsdale Rd  City Scottsdale  FEC ID number of contributing federal political committee.  Name of Employer Scottsdale Medical Imaging  Receipt For: Primary General	Ste 130 State Zip Code AZ 85251-5649  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 35605544  Amount of Each Receipt this Period  150.00
Full Name (Last, First, Middle Initial) Dr. Michael Bruce Gotway  Mailing Address 7101 E Berneil Ln  City Paradise Valley  FEC ID number of contributing federal political committee.  Name of Employer Scottsdale Medical Imaging  Receipt For: Primary General	State Zip Code AZ 85253-1973  C  Occupation Diagnostic Radiologist  Aggregate Year-to-Date   450.00	Date of Receipt  M M M J D D J D J D J D J D J D J D J D
Full Name (Last, First, Middle Initial) Dr. William Horsley  Mailing Address Scottsdale Medical Ima 3501 N Scottsdale Rd  City Scottsdale  FEC ID number of contributing federal political committee.  Name of Employer Scottsdale Medical Imaging	Ste 130 State Zip Code AZ 85251-5649  C Occupation Diagnostic Radiologist	Date of Receipt  M M M D D D Y Y Y Y Y  O 6 30 2010  Transaction ID: 35605547  Amount of Each Receipt this Period  250.00
Receipt For: Primary General Other (specify)   SUBTOTAL of Receipts This Page (optional)	Aggregate Year-to-Date ▼ 550.00	625.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American College of Radiology Associ	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. William Jones		Date of Receipt
Mailing Address 9477 E Shangri LA R  City	State Zip Code	0 6 3 0 2 0 1 0 Transaction ID: 35605548
Scottsdale	AZ 85260-6143	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	150.00
Name of Employer Scottsdale Medical Imaging	Occupation Diagnostic Radiologist	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Mark Keiper		Date of Receipt
Mailing Address Scottsdale Medical In 3501 N Scottsdale Ro	l Ste 130	06 30 7 2010
City	State Zip Code	Transaction ID: 35605588
Scottsdale	AZ 85251-5649	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Southwest Diagnostic Imag- ing	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Ronald Korn		Date of Receipt
Mailing Address 6419 E Caron Dr		06 30 7 2010
City	State Zip Code	Transaction ID: 35605589
Paradise Valley	AZ 85253-1862	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Scottsdale Medical Imaging	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
SUBTOTAL of Receipts This Page (optional)		450.00
TOTAL This Period (last page this line numbe	·	

	ULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 125 (check only one)    X
or for comm	ation copied from such Reports and St nercial purposes, other than using the DF COMMITTEE (In Full) can College of Radiology Associa	name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Dr. Mark Mailing .  City Scotts FEC ID	Address 13026 E Turquoise Ave	State AZ	Zip Code 85259-5341	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name or Scottsd	f Employer ale Medical Imaging		n ic Radiologist e Year-to-Date ▼	
Dr. Dani	ne (Last, First, Middle Initial) el Maki Address 9944 E South Bend Dr	State	Zip Code	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Scotts FEC ID federal p	number of contributing political committee.	AZ C	85255-2538	Amount of Each Receipt this Period  120.00
Southwoing Receipt	f Employer est Diagnostic Imag-  For: rimary	_ · _ ·	n ic Radiologist e Year-to-Date ▼ 240.00	
Dr. Chris	ne (Last, First, Middle Initial) stopher May Address 14627 E Paradise Dr			Date of Receipt
	ain Hills	State AZ	Zip Code 85268-6157	Transaction ID: 35605595  Amount of Each Receipt this Period
federal p	number of contributing political committee.  f Employer 1573	Occupation		150.00
Receipt			ic Radiologist  9 Year-to-Date ▼  300.00	]
SUBTOTA	AL of Receipts This Page (optional)		······	420.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 125 (check only one)    X
4	Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma ne name and ad	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assor	ciation Politic	al Action Committee	
Α.	Full Name (Last, First, Middle Initial) Dr. Sunil Ram			Date of Receipt
	Mailing Address 12455 N 118th Way			06 30 7 2010
	City	State	Zip Code	Transaction ID: 35606007
	Scottsdale  FEC ID number of contributing federal political committee.	C	85259-2718	Amount of Each Receipt this Period  300.00
	Name of Employer Scottsdale Medical Imaging	Occupation	n tic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	_ <del>'</del>	e Year-to-Date ▼ 600.00	1
_ 3.	Full Name (Last, First, Middle Initial) Dr. Terry Reeves	0 0		Date of Receipt
	Mailing Address 10537 E Sunnyside D	Or		06 30 7 2010
	City	State	Zip Code	Transaction ID: 35606008
	Scottsdale	AZ	85259-2917	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		120.00
	Name of Employer Scottsdale Medical Imaging	Occupation Diagnost	<sub>n</sub> tic Radiologist	
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		240.00	
_ ).	Full Name (Last, First, Middle Initial) Dr. Chad Palmer			Date of Receipt
	Mailing Address 10678 E Palm Ridge	Dr		06 30 2010
	City	State	Zip Code	Transaction ID: 35606009
	Scottsdale  FEC ID number of contributing federal political committee.	C	85255-1717	Amount of Each Receipt this Period 150.00
	Name of Employer Scottsdale Medical Imaging	Occupation Diagnos	n tic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	_ ' _ <u>*</u> _	e Year-to-Date ▼ 300.00	
	SUBTOTAL of Receipts This Page (optional)			570.00
t	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 83 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American College of Radiology Associ	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. William Taylor		Date of Receipt
Mailing Address 4045 E Desert Crest [	Or State Zip Code	0 6 3 0 7 2 0 1 0
City Paradise Valley	AZ 85253-3942	Transaction ID: 35606187  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	105.00
Name of Employer Scottsdale Medical Imaging	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
Full Name (Last, First, Middle Initial) Dr. Rodney Owen	I	Date of Receipt
Mailing Address 9122 N 60th St		06 / 30 / Y Y Y Y
City	State Zip Code	Transaction ID: 35606188
Paradise Valley	AZ 85253-1735	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	270.00
Name of Employer Scottsdale Medical Imaging	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00	
Full Name (Last, First, Middle Initial) Dr. Aimee Monica Aguiar		Date of Receipt
Mailing Address 7391 Southwest 78 C	ourt	06 30 7 2010
City	State Zip Code	Transaction ID: 35613308
<u>Miami</u>	FL 33143-4023	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Radiology Associates of South Florida,	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional) .		1375.00
TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	for	e separate schedule(s) each category of the stailed Summary Page	FOR LINE NUMBER: PAGE 84 / 125 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Assoc	name and address	of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Jack Ziffer  Mailing Address Miami Cardiac & Vasc 8900 N Kendall Dr  City Miami  FEC ID number of contributing federal political committee.  Name of Employer Radiology Associates of South Florida, Receipt For: Primary General Other (specify)	ular Inst State Z	Zip Code 33176-2197  diologist to-Date ▼ 1000.00	Date of Receipt  0 6 30 2010  Transaction ID: 35613309  Amount of Each Receipt this Period  1000.00
Full Name (Last, First, Middle Initial) Dr. Hao V. Vuong Mailing Address 888 Brickwell Key Dr Apt 2706 City Miami Beach FEC ID number of contributing federal political committee.  Name of Employer Radiology Associates of South Florida, Receipt For: Primary General Other (specify)			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. Eduardo Villalobos  Mailing Address 9783 SW 57th Street  City Miami  FEC ID number of contributing federal political committee.  Name of Employer Radiology Associates of South Florida, Receipt For:  Primary General Other (specify)   Other (specify)			Date of Receipt  M M M O B D O Y Y Y Y Y Y  Transaction ID: 35613311  Amount of Each Receipt this Period  1000.00
SUBTOTAL of Receipts This Page (optional)			3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 125 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Associations (In Full)	e name and add	ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Athanassios I. Tsoukas Mailing Address 3211 Morris Ln  City Miami  FEC ID number of contributing federal political committee.  Name of Employer Radiology Associates of South Florida. Receipt For: Primary General Other (specify)	, ' <u> </u>	Zip Code 33133-3230  c Radiologist  Year-to-Date ▼	Date of Receipt  M M M J D D J 2 0 1 0  Transaction ID: 35613312  Amount of Each Receipt this Period  1000.00
Full Name (Last, First, Middle Initial) Dr. Cliff E. Stamler  Mailing Address 10345 Coral Creek Ro  City  Coral Gables  FEC ID number of contributing federal political committee.  Name of Employer Radiology Associates of South Florida, Receipt For:  Primary General Other (specify)	State FL C Occupation Diagnosti	Zip Code 33156-3426  C Radiologist  Year-to-Date ▼ 1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 35613323  Amount of Each Receipt this Period
Full Name (Last, First, Middle Initial) Dr. Antonio Rabassa  Mailing Address 300 Cypress Dr  City  Key Biscayne  FEC ID number of contributing federal political committee.  Name of Employer Radiology Associates of South Florida, Receipt For:  Primary  General  Other (specify)	<del>_ '</del>	Zip Code 33149-1210  c Radiologist Year-to-Date ▼	Date of Receipt  M M M J D D J D Y Y Y Y Y  O 6 30 2010  Transaction ID: 35613324  Amount of Each Receipt this Period  1000.00
SUBTOTAL of Receipts This Page (optional) .			3000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and Stor for commercial purposes, other than using the	atements may not be sold or used by any persor name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American College of Radiology Associa	ation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Jonathan Messinger		Date of Receipt
Mailing Address 6405 SW 114th St	7.01	06 / 30 / 2010
City Miami	State Zip Code FL 33156-4868	Transaction ID: 35613325
FEC ID number of contributing federal political committee.	FL 33156-4868	Amount of Each Receipt this Period  1000.00
Name of Employer Radiology Associates of South Florida, Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Occupation Diagnostic Radiologist  Aggregate Year-to-Date  1000.00	
Full Name (Last, First, Middle Initial) Dr. Ivan Malave-Vidal		Date of Receipt
Mailing Address South Miami Hospital 6200 SW 73rd St		06 30 2010
City	State Zip Code	Transaction ID: 35613326
South Miami	FL 33143-4679	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Radiology Associates of South Florida,	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Kirsten Luedemann		Date of Receipt
Mailing Address 8860 SW 105th St		0 6 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35613327
<u>Miami</u>	FL 33176-3716	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Radiology Associates of South Florida,	Occupation Diagnostic Radiologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		3000.00
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number of	<u> </u>	3000.

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 87 / 125 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using t	d Statements may the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation Politica	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Stephane Lafosse-Marin			Date of Receipt
Mailing Address 4200 Sunshine Road	d		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35613621
<u>Miami</u>	FL	33133-6741	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Radiology Associates of	Occupation	n	7
South Florida,	Diagnost	ic Radiologist	
Receipt For:	Aggregate	Year-to-Date	
Primary General Other (specify) ▼	0 0	1000.00	
Full Name (Last, First, Middle Initial) Dr. James Greve			Date of Receipt
Mailing Address South Miami Hospita 6200 SW 73rd St	al		06 30 2010
City	State	Zip Code	Transaction ID: 35613622
South Miami	FL	33143-4679	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Radiology Associates of South Florida,	Occupation	n ic Radiologist	
South Florida, Receipt For:		Year-to-Date ▼	
Primary General Other (specify) ▼	riggregate	1000.00	
Full Name (Last, First, Middle Initial) Dr. Lawrence Francis Elgarresta			Date of Receipt
Mailing Address 8325 Grand Canal D	Orive		06 30 2010
City	State	Zip Code	Transaction ID: 35613623
<u>Miami</u>	FL	33144-3539	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Radiology Associates of South Florida,	Occupation Diagnost	n ic Radiologist	
Receipt For:	<del> '</del>	Year-to-Date ▼	7
Primary General Other (specify) ▼	33.133.10	1000.00	
SUBTOTAL of Receipts This Page (optional)			3000.00

SCHEDULE A (FEC Form SITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 125 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any persong the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology A	Association Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Juan Diez		Date of Receipt
Mailing Address 1331 Brickell Bay	Dr Apt 3611	0 6 3 0 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35613624
Miami  FEC ID number of contributing federal political committee.	FL 33131-3686	Amount of Each Receipt this Period  1000.00
Name of Employer Radiology Associates of South Florida, Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Diagnostic Radiologist  Aggregate Year-to-Date   1000.00	
Full Name (Last, First, Middle Initial) Dr. Ricardo Cury Mailing Address 13030 Zambrana	Ct	Date of Receipt
City  Coral Gables  FEC ID number of contributing federal political committee.	State Zip Code FL 33156-6440	0 6 3 0 2 0 1 0  Transaction ID: 35613625  Amount of Each Receipt this Period  1000.00
Name of Employer Radiology Associates of South Florida, Receipt For:  Primary General  Other (specify) ▼	Occupation Diagnostic Radiologist  Aggregate Year-to-Date   1000.00	
Full Name (Last, First, Middle Initial) Dr. Ira Braun		Date of Receipt
Mailing Address 13520 SW 63rd A	Ave	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Miami</u>	State Zip Code FL 33156-7012	Transaction ID: 35613628  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Radiology Associates of South Florida,	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (option	onal)	3000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 125 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American College of Radiology Asso	the name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Kevin Abrams  Mailing Address 4410 Nautilus Dr			Date of Receipt
City Miami Beach FEC ID number of contributing	State FL	Zip Code 33140-2826	Transaction ID: 35613629  Amount of Each Receipt this Period  1000.00
Receipt For:  Primary  Other (specify)	Occupation Diagnost	n ic Radiologist e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Dr. Neil Messinger  Mailing Address Baptist Hospital of M 8900 N Kendall Dr City	/liami	Zip Code	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Miami  FEC ID number of contributing federal political committee.	FL	33176-2197	Amount of Each Receipt this Period  500.00
Name of Employer Radiology Associates of South Florida, Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		n ic Radiologist e Year-to-Date ▼ 500.00	]
Full Name (Last, First, Middle Initial) Dr. Vipin Bansal  Mailing Address Radiological Assoc of	of Sacramento		Date of Receipt
1500 Expo Pkwy			06 30 2010
City <u>Sacramento</u>	State CA	Zip Code 95815-4227	Transaction ID: 35613764  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Radiological Assoc. of Sa- cramento Receipt For:  Primary  General  Other (specify) ▼	<del></del>	n ic Radiologist • Year-to-Date ▼	1
SUBTOTAL of Receipts This Page (optional)	)		1800.00

	CHEDULE A (FEC Form 3X EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 125 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
A	ny information copied from such Reports and for commercial purposes, other than using t	I Statements may not be sold or used by any per he name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Asso	ociation Political Action Committee	
<u></u>	Full Name (Last, First, Middle Initial) Dr. Garyun Blackmon		Date of Receipt
	Mailing Address 8370 Rustic Woods	Way	0 6 3 0 2 0 1 0
	City	State Zip Code	Transaction ID: 35613765
	Loomis	CA 95650-8038	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Self-Employed	Occupation Diagnostic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
	Full Name (Last, First, Middle Initial) Dr. George Bolton		Date of Receipt
	Mailing Address 133 Yankton St		06 30 7 9 9 9
	City	State Zip Code	Transaction ID: 35613771
	Folsom	CA 95630-8140	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	600.00	
	Full Name (Last, First, Middle Initial) Dr. Jonathan Breslau		Date of Receipt
	Mailing Address Rad Assoc of Sacral 1500 Expo Pkwy	mento	06 30 7 2010
	City	State Zip Code	Transaction ID: 35613772
	Sacramento	CA 95815-4227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	680.04
	Name of Employer Radiological Associates of Sacramento	Occupation Diagnostic Radiologist	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1360.08	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 125 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may the name and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Ass	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Nicole Carbo			Date of Receipt
Mailing Address Rad Assoc of Sacra 1500 Expo Pkwy	amento		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35613773
Sacramento	CA	95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Radiological Assoc. of Sa-	Occupation	n ic Radiologist	
cramento Receipt For:		Year-to-Date <b>V</b>	$\dashv$
Primary General Other (specify) ▼	Aggregate	300.00	
Full Name (Last, First, Middle Initial) Dr. Christopher Chong	ı		Date of Receipt
Mailing Address 27075 E El Macero	ı		06 30 2010
City	State	Zip Code	Transaction ID: 35613774
El Macero	CA	95618-1006	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnost	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Huu-Ninh Dao	<u> </u>		Date of Receipt
Mailing Address 2627 Rockwell Dr			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35613775
Davis	CA	95618-7664	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Radiological Associates of Sacramento	Occupation Diagnost	n ic Radiologist	
Receipt For:	<del>-                                    </del>	Year-to-Date ▼	
Primary General Other (specify) ▼	.55. 554.6	600.00	
SUBTOTAL of Receipts This Page (optional	51)		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	for ea	separate schedule(s) ach category of the led Summary Page	FOR LINE NUMBER: PAGE 92 / 125 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Radiology Ass	the name and address of a	any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. John De la Vega  Mailing Address Rad Assoc of Sacra	amento		Date of Receipt
City Sacramento  FEC ID number of contributing	CA 958	Code 315-4227	0 6 3 0 2 0 1 0  Transaction ID: 35613785  Amount of Each Receipt this Period  625.02
Receipt For:  Primary  Other (specify) ▼  Name of Employer Radiological Assoc. of Sacramento Receipt For:  Other (specify) ▼	Occupation Diagnostic Radio Aggregate Year-to-		023.02
Full Name (Last, First, Middle Initial) Dr. Roland DeMarco  Mailing Address 5174 Prior Rdg			Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip	Code	Transaction ID: 35613786
Granite Bay	CA 957	746-7186	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radio		
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-	300.00	]
Full Name (Last, First, Middle Initial) Dr. Scott Foster	<b>'</b>		Date of Receipt
Mailing Address Radiological Association 1500 Expo Pkwy		0.1	06 30 2010
City Sacramento		Code 315-4227	Transaction ID: 35613788  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10 4227	300.00
Name of Employer Radiological Assoc. of Sa- cramento Receipt For:	Occupation Diagnostic Radio		
Primary General Other (specify) ▼	Aggregate Year-to-	600.00	]
SUBTOTAL of Receipts This Page (optional			1075.02

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and S or for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American College of Radiology Assoc	iation Politic	al Action Committee	
∠ <b>A</b> .	Full Name (Last, First, Middle Initial) Dr. Hani Greiss			Date of Receipt
	Mailing Address Roseville Imaging 1640 E Roseville Pkwy	Ste 100		06 30 2010
	City	State	Zip Code	Transaction ID: 35613789
	Roseville	CA	95661-3922	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnos	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		600.00	
— В.	Full Name (Last, First, Middle Initial) Dr. Patrick Harty			Date of Receipt
	Mailing Address 5249 Wyndham Oak L	.n		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 35613790
	Carmichael	CA	95608-3472	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnost	n tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		600.00	
_ С.	Full Name (Last, First, Middle Initial) Dr. Glenn Hofer	l		Date of Receipt
	Mailing Address Rad Assoc of Sacramo			06 30 / 2010
	City	State	Zip Code	Transaction ID: 35613791
	Sacramento	CA	95815-4227	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Rad Assoc of Sacramento	Occupation Diagnos	<sup>n</sup> tic Radiologist	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		600.00	
	SUBTOTAL of Receipts This Page (optional)	1		900.00
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 94 / 125   (check only one)     X   11a     11b     11c   12   13   14   15   16
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may g the name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American College of Radiology As:	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Christopher Hoffman			Date of Receipt
Mailing Address 1117 Teneighth Wa	ay		M M / D D / Y Y Y Y Y O D O O O O O O O O O O O O O
City Sacramento	State CA	Zip Code 95818-4024	Transaction ID: 35613792  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33010 4024	252.00
Name of Employer Self-Employed	Occupation Diagnost	n ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	<del> </del>	Year-to-Date ▼ 504.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey Kuo			Date of Receipt
Mailing Address 2619 Mariella Dr			0 6 3 0 2 0 1 0
City	State	Zip Code	Transaction ID: 35613793
Rocklin FEC ID number of contributing	CA	95765-5618	Amount of Each Receipt this Period  300.00
federal political committee.	<u> </u>		
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnost	n ic Radiologist	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		600.00	
Full Name (Last, First, Middle Initial) Dr. Don Charles Loomer			Date of Receipt
Mailing Address 1747 E Wallington	Ln		0 6 3 0 2 0 1 0
City	State	Zip Code	Transaction ID: 35613794
Fresno	CA	93730-3596	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		300.00
Name of Employer Radiological Assoc. of Sa- cramento		ic Radiologist	
Receipt For:  Primary  General	Aggregate	Year-to-Date ▼	-
Other (specify)		600.00	
			852.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 125 (check only one)    X
or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	and Statements may not be sold or used by any person g the name and address of any political committee to sociation Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Vartan Malian  Mailing Address 100 Crane Meadov	w Ct	Date of Receipt
City Roseville	State Zip Code CA 95661-4030	Transaction ID: 35613797  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Radiological Assoc. of Sa- cramento Receipt For:  Primary General Other (specify) ▼	Occupation Diagnostic Radiologist  Aggregate Year-to-Date ▼  600.00	
Full Name (Last, First, Middle Initial) Dr. Mylon Marshall Mailing Address 2201 Lassen Pl		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35613798
<u>Davis</u>	CA 95616-6604	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dr. Charles McDonnell, III		Date of Receipt
Mailing Address 5436 Ridge Park D	)r	06 30 2010
City	State Zip Code	Transaction ID: 35613799
Loomis	CA 95650-7701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Radiological Assoc. of Sa- cramento  Receipt For:	Occupation Diagnostic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (option	al)	900.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 96 / 125   (check only one)     X   11a     11b     11c   12   13   14     15     16
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American College of Radiology As	sociation Politic	al Action Committee	
Full Name (Last, First, Middle Initial) Dr. Miyuki Murphy			Date of Receipt
Mailing Address 5198 Prior Rdg			M M / D D / Y Y Y Y Y O O O O O O O O O O O O O O
City Granite Bay	State CA	Zip Code 95746-7186	Transaction ID: 35613800  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33740 7100	150.00
Name of Employer Radiological Assoc. of Sacramento Receipt For:  Primary General Other (specify) ▼	<del></del>	n ic Radiologist e Year-to-Date ▼	
Full Name (Last, First, Middle Initial)  Dr. Michael Norton  Mailing Address Rad Assoc of Sacr	amento Med Gr	р	Date of Receipt
1500 Expo Pkwy City	State	Zip Code	0 6 3 0 2 0 1 0 Transaction ID: 35613801
Sacramento	CA	95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Rad Assoc of Sacramento	Occupatio	n ic Radiologist	
Med Gr Receipt For:		e Year-to-Date ▼	
Primary General Other (specify) ▼	, iggi ogali	600.00	]
Full Name (Last, First, Middle Initial) Dr. Narasimhachari Raghavan			Date of Receipt
Mailing Address 3157 Oak Cliff Cir			0 6 3 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Carmichael	State CA	Zip Code 95608-4571	Transaction ID: 35613832
FEC ID number of contributing federal political committee.	C	93006-4371	Amount of Each Receipt this Period  150.00
Name of Employer Radiological Assoc. of Sa- cramin Family		ic Radiologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	]
SUBTOTAL of Receipts This Page (options			600.00

	for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using to	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American College of Radiology Asso	ociation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Christopher Schaefer		Date of Receipt
Mailing Address Radiological Assoc on 1500 Expo Pkwy		06 30 7 2010
City	State Zip Code	Transaction ID: 35613833
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Radiological Assoc. of Sa-	Occupation Diagnostic Radiologist	
cramento Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) Dr. Albert Schraner		Date of Receipt
Mailing Address 5300 Tufts St		06 30 7 2010
City	State Zip Code	Transaction ID: 35613834
<u>Davis</u>	CA 95616-7219	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) Dr. David Seidenwurm		Date of Receipt
Mailing Address 2806 Hoffman Bluff \	Vay	0 6 3 0 / Y Y Y Y Y
City	State Zip Code	Transaction ID: 35613835
Carmichael	CA 95608-4522	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnostic Radiologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
SUBTOTAL of Receipts This Page (optional)		900.00
TOTAL This Period (last page this line numb	·	

NAME OF COMM American Colleg  Full Name (Last, F Dr. Christopher Sim Mailing Address  City Sacramento  FEC ID number of federal political cor  Name of Employer Radiological Assoc cramento Receipt For: Primary Other (specif  Full Name (Last, F Dr. Susan Sompayr: Mailing Address  City Sacramento  FEC ID number of federal political cor  Name of Employer Radiological Assoc ramen Receipt For: Primary Other (specif  Full Name (Last, F Dr. James Steidler	ge of Radiology Associa irst, Middle Initial) opoulos Rad Assoc of Sacramer 1500 Expo Pkwy  contributing nmittee. c. of Sa- General irst, Middle Initial) ac Radiological Assoc of S 1500 Expo Pkwy	nto State CA C Occupation Diagnosti Aggregate	Zip Code 95815-4227	Date of Reco	eipt  D 30
American College  Full Name (Last, F Dr. Christopher Sim Mailing Address  City Sacramento  FEC ID number of federal political cor  Name of Employer Radiological Assoc cramento Receipt For: Primary Other (specif  Full Name (Last, F Dr. Susan Sompayre Mailing Address  City Sacramento  FEC ID number of federal political cor  Name of Employer Radiological Assoc ramen Receipt For: Primary Other (specif  Full Name (Last, F Dr. James Steidler	ge of Radiology Associa	State CA C Occupation Diagnosti Aggregate Cacramento State	Zip Code 95815-4227  C Radiologist Year-to-Date ▼  600.00	Date of Reco	eipt  D D D D D D D D D D D D D D D D D D D
Dr. Christopher Sim Mailing Address  City Sacramento  FEC ID number of federal political cor  Name of Employer Radiological Assoc cramento Receipt For: Primary Other (specification of Sacramento)  Full Name (Last, F. Dr. Susan Sompayra Mailing Address  City Sacramento  FEC ID number of federal political cor  Name of Employer Radiological Assoc ramen Receipt For: Primary Other (specification of Sacramento)  Receipt For: Primary Other (specification of Sacramento)  Full Name (Last, F. Dr. James Steidler	Rad Assoc of Sacramer 1500 Expo Pkwy  contributing nmittee.  c. of Sa-  General  fy)  first, Middle Initial) ac  Radiological Assoc of S 1500 Expo Pkwy	State CA  C  Occupation Diagnosti Aggregate  Cacramento State	95815-4227  C Radiologist  Year-to-Date ▼  600.00	Date of Reco	eipt  D D D D D D D D D D D D D D D D D D D
City Sacramento  FEC ID number of federal political cor  Name of Employer Radiological Assoc cramento Receipt For: Primary Other (specification of Sacramento)  Full Name (Last, F. Dr. Susan Sompayr: Mailing Address)  City Sacramento  FEC ID number of federal political cor  Name of Employer Radiological Assoc ramen Receipt For: Primary Other (specification of Specification of Sp	contributing nmittee.  c. of Sa-  General  irst, Middle Initial) ac  Radiological Assoc of S 1500 Expo Pkwy	State CA  C  Occupation Diagnosti Aggregate  Cacramento State	95815-4227  C Radiologist  Year-to-Date ▼  600.00	Date of Reco	3 0 2 0 1 0  ID: 35613836 Each Receipt this Period 300.00
City Sacramento  FEC ID number of federal political cor  Name of Employer Radiological Assoc cramento Receipt For: Primary Other (specification of the context of the conte	contributing nmittee.  c. of Sa-  General  irst, Middle Initial) ac  Radiological Assoc of S 1500 Expo Pkwy	CA C Occupation Diagnosti Aggregate Cacramento State	95815-4227  C Radiologist  Year-to-Date ▼  600.00	Date of Reco	eipt  D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of federal political cor Name of Employer Radiological Assocramento Receipt For: Primary Other (specification of Secretary Primary Mailing Address  City Sacramento FEC ID number of federal political cor Name of Employer Radiological Assocramen Receipt For: Primary Other (specification of Specification of Secretary Primary Other (specification of Secretary Primary Other (specification of Secretary	nmittee.  c. of Sa-  General  iy) ▼  irst, Middle Initial)  ac  Radiological Assoc of S 1500 Expo Pkwy	Occupation Diagnosti Aggregate  Sacramento  State	To Radiologist  Year-to-Date ▼  600.00	Date of Reco	eipt  300.00  2010  300.00
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cramento Receipt For: Primary Other (specification of the content	General  iy) ▼  irst, Middle Initial) ac  Radiological Assoc of S 1500 Expo Pkwy	Diagnosti Aggregate  Sacramento  State	c Radiologist Year-to-Date ▼  600.00  Zip Code	0 6	3 0 / 2 0 1 0 1D: 35613842
cramento Receipt For: Primary Other (specification of the content	General  iy) ▼  irst, Middle Initial) ac  Radiological Assoc of S 1500 Expo Pkwy	Aggregate  Sacramento  State	Year-to-Date ▼ 600.00  Zip Code	0 6	3 0 / 2 0 1 0 1D: 35613842
Primary Other (specification)  Full Name (Last, F. Dr. Susan Sompayrom) Mailing Address  City Sacramento  FEC ID number of federal political coronical Association and Primary Other (specification)  Full Name (Last, F. Dr. James Steidler	irst, Middle Initial) ac Radiological Assoc of S 1500 Expo Pkwy	Sacramento	600.00 Zip Code	0 6	3 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, F Dr. Susan Sompayr. Mailing Address  City Sacramento  FEC ID number of federal political cor  Name of Employer Radiological Assocramen  Receipt For: Primary Other (specif	irst, Middle Initial) ac Radiological Assoc of S 1500 Expo Pkwy	State	Zip Code	0 6	3 0 / 2 0 1 0 1D: 35613842
Dr. Susan Sompayre Mailing Address  City Sacramento  FEC ID number of federal political cor  Name of Employer Radiological Assocramen  Receipt For: Primary Other (specification of the content of the co	ac Radiological Assoc of S 1500 Expo Pkwy	State	·	0 6	3 0 / 2 0 1 0 1D: 35613842
Mailing Address  City Sacramento  FEC ID number of federal political cor  Name of Employer Radiological Assocramen Receipt For: Primary Other (specif	Radiological Assoc of S 1500 Expo Pkwy	State	·	0 6	3 0 / 2 0 1 0 1D: 35613842
City Sacramento FEC ID number of federal political cor Name of Employer Radiological Assocramen Receipt For: Primary Other (specif			·		
FEC ID number of federal political cor  Name of Employer Radiological Association and Primary Other (specifical Name (Last, F. Dr. James Steidler)		CA	95815-4227		
Name of Employer Radiological Assocramen Receipt For: Primary Other (specification of the content of the conten				Amount of E	Each Receipt this Period
ramen Receipt For: Primary Other (specif		C			300.00
Receipt For: Primary Other (specif	c of Sac-	Occupation Diagnosti	n c Radiologist		
Dr. James Steidler	General	Aggregate	Year-to-Date ▼ 600.00		
-	irst, Middle Initial)			Date of Rece	eipt
Mailing Address	1806 Vela Pl			0 6 /	30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction	<b>ID:</b> 35613843
<u>Davis</u>		CA	95616-6760	Amount of E	Each Receipt this Period
FEC ID number of federal political cor	contributing nmittee.	C		0 0	300.00
Name of Employer Radiological Assoc cramento	c. of Sa-	Occupation Diagnosti	n c Radiologist		
Receipt For:		Aggregate	Year-to-Date ▼		
Primary Other (specif	General y) <b>▼</b>		600.00		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sch for each category Detailed Summar	of the
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American College of Radiology Associations (In Full)	name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Bahram Varjavand Mailing Address 1501 Chalupa PI  City Davis  FEC ID number of contributing federal political committee.  Name of Employer Radiological Assoc. of Sacramento Receipt For: Primary General Other (specify)		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) Dr. Calvin Wang  Mailing Address Rad Assoc of Sacram 1500 Expo Pkwy  City  Sacramento  FEC ID number of contributing federal political committee.  Name of Employer Radiological Assoc. of Sacramento  Receipt For:  Primary General Other (specify)	State Zip Code CA 95815-4227  C  Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt  M M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. David Winfield  Mailing Address Rad Assoc of Sacram 1500 Expo Pkwy  City Sacramento  FEC ID number of contributing federal political committee.  Name of Employer Radiological Assoc. of Sacramento  Receipt For: Primary General Other (specify)	State Zip Code CA 95815-4227  C  Occupation Diagnostic Radiologist Aggregate Year-to-Date	Date of Receipt  M M M / D D / Y Y Y Y Y  Transaction ID: 35613847  Amount of Each Receipt this Period  300.00
SUBTOTAL of Receipts This Page (optional) .		750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 125 (check only one)    X
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American College of Radiology Ass	the name and add	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Dr. Dylan Witt Mailing Address 3636 Washoe St			Date of Receipt  0 6 3 0 2 0 1 0
City  Davis  FEC ID number of contributing federal political committee.	State CA	Zip Code 95616-5087	Transaction ID: 35613848  Amount of Each Receipt this Period  300.00
Name of Employer Radiological Assoc. of Sacramento Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	<del></del>	n cic Radiologist e Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Dr. Frederic Conte  Mailing Address 918 Colby Dr	•		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City <u>Davis</u> FEC ID number of contributing federal political committee.	State CA	Zip Code 95616-1758	Transaction ID: 35613849  Amount of Each Receipt this Period  150.00
Name of Employer Radiological Assoc. of Sacramento Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		n cic Radiologist e Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Benjamin Franc Mailing Address Radiological Assoc	of Sacramento		Date of Receipt
1500 Expo Pkwy	State	Zip Code	0 6 3 0 2 0 1 0 Transaction ID: 35613850
Sacramento  FEC ID number of contributing federal political committee.	CA	95815-4227	Amount of Each Receipt this Period  300.00
Name of Employer University of California	Occupatio	n ic Radiologist	
Receipt For:  Primary  General  Other (specify) ▼	<del></del>	e Year-to-Date ▼ 600.00	
SUBTOTAL of Receipts This Page (optional	al)	······	750.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 101 / 125 (check only one)    X
0	ny information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements ma ne name and ad	y not be sold or used by any person dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American College of Radiology Asso	ciation Politic	cal Action Committee	
۸.	Full Name (Last, First, Middle Initial) Dr. Richard W. Myers			Date of Receipt
	Mailing Address 1500 Expo Parkway			06 30 7 2010
	City	State CA	Zip Code	Transaction ID: 35613851
	Sacramento  FEC ID number of contributing federal political committee.	C	95815-4227	Amount of Each Receipt this Period  150.00
	Name of Employer Radiological Associates	Occupation	on tic Radiologist	
	of Sacramento Receipt For:	'	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	
_	Full Name (Last, First, Middle Initial) Dr. Sharon Dutton	1		Date of Receipt
	Mailing Address Rad Assoc of Sacran 1500 Expo Pkwy	nento		06 30 7 2010
	City	State	Zip Code	Transaction ID: 35613854
	Sacramento  FEC ID number of contributing federal political committee.	CA	95815-4227	Amount of Each Receipt this Period 300.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Diagnos	on tic Radiologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
_	Full Name (Last, First, Middle Initial) Dr. Roger Gilbert			Date of Receipt
	Mailing Address Rad Assoc of Sacran 1500 Expo Pkwy	nento		0 6 3 0 Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 35613855
	Sacramento FEC ID number of contributing federal political committee.	CA	95815-4227	Amount of Each Receipt this Period 300.00
	Name of Employer Radiological Assoc. of Sa- cramento	Occupation Radiation	on n Oncologist	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 600.00	
	SUBTOTAL of Receipts This Page (optional)	1		750.00

## SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	f	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 102 / 125 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not ne name and address	be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American College of Radiology Asso	ciation Political A	ction Committee	
Full Name (Last, First, Middle Initial) Dr. Brian Goldsmith			Date of Receipt
Mailing Address Radiological Assoc o 2800 L St Ste 10			06 30 7 2010
City Sacramento	State CA	Zip Code 95816-5616	Transaction ID: 35613856
FEC ID number of contributing federal political committee.	C	93010-3010	Amount of Each Receipt this Period  150.00
Name of Employer Radiological Assoc. of Sa- cramento Receipt For:	Occupation Radiation Or Aggregate Yea		
Primary General Other (specify) ▼	0 0 0	300.00	
Full Name (Last, First, Middle Initial) Dr. Christopher Jones Mailing Address Radiological Assoc of	f Sooromonto		Date of Receipt
2800 L St Ste 10			06 30 7 2010
City Sacramento	State CA	Zip Code 95816-5616	Transaction ID: 35613857  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	93010-3010	240.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Radiation Or	ncologist	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 480.00	
Full Name (Last, First, Middle Initial) Dr. Susan Lee			Date of Receipt
Mailing Address Radiological Assoc of 1500 Expo Pkwy	f Sacramento		0 6 3 0 Y Y Y Y Y
City	State	Zip Code	Transaction ID: 35613858
Sacramento  FEC ID number of contributing federal political committee.	CA	95815-4227	Amount of Each Receipt this Period  600.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Radiation O		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Yea	ar-to-Date ▼ 1200.00	
SUBTOTAL of Receipts This Page (optional)	•		990.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American College of Radiology Associ	ciation Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. David Linstadt		Date of Receipt
Mailing Address Radiation Oncology C 2 Medical Plaza Dr St		06 30 2010
City	State Zip Code	Transaction ID: 35613889
Roseville	CA 95661-3049	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Radiation Oncology Centers	Occupation Radiation Oncologist	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	600.00	
Full Name (Last, First, Middle Initial) Dr. Mark Logsdon		Date of Receipt
Mailing Address Rad Associates of Sa 1500 Expo Pkwy	cramento	0 6 3 0 / Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35613890
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Radiation Oncologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) Dr. Anthony Pu	1	Date of Receipt
Mailing Address Radiological Assoc of 1500 Expo Pkwy	Sacramento	0 6 3 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35613891
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Radiological Assoc of Sac- ramen	Occupation Radiation Oncologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
_		
SUBTOTAL of Receipts This Page (optional) .	<b></b>	750.00
TOTAL This Period (last page this line number	r only)	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 125 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than u	is and Statements may not be sold or used by any person sing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American College of Radiology	Association Political Action Committee	
Full Name (Last, First, Middle Initial) Dr. Seth Rosenthal		Date of Receipt
Mailing Address Rad Assoc of Sa 1500 Expo Pkw		06 30 2010
City	State Zip Code	Transaction ID: 35613892
Sacramento	CA 95815-4227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer Radiological Assoc. of Sa- cramento	Occupation Radiation Oncologist	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial) Dr. Janice Ryu		Date of Receipt
Mailing Address 2090 8th Ave		0 6 3 0 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35613893
Sacramento	CA 95818-4211	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	150.00
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial) Dr. Harvey Wolkov		Date of Receipt
Mailing Address Radiation Onco 2800 L St Ste 10		0 6 3 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 35613894
Sacramento	CA 95816-5616	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer Radioloical Assoc. of Sac-	Occupation	
ramento Med C Receipt For:	Radiation Oncologist  Aggregate Year-to-Date ▼	-
Primary General		
Other (specify) ▼	240.00	
SUBTOTAL of Receipts This Page (ont	ional)	420.00
555.57.12 of resource rains rago (opt	<u></u>	101570.55
TOTAL This Period (last page this line	number only)	1012/0.22

	JLE B (FEC Form 3	y Use sepa	arate schedule(s)	FOR LINE	
ITEMIZE	D DISBURSEMENT		category of the ´ Summary Page	(check onl	y one)  22
					for the purpose of soliciting contributions olicit contributions from such committee
\	F COMMITTEE (In Full) an College of Radiology As	ssociation Political	Action Commi	ttee	
Full Nam	e (Last, First, Middle Initial)				Transaction ID: 34931340 Date of Disbursement
Mailing A	ddress 5915 Eastman <i>A</i> Suite 100	Avenue			$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Midland	oute 100	State MI	Zip Code 48640		Amount of Each Disbursement this Period
Purpose	of Disbursement			011	5000.00
Candidate CAMPA	C			Category/ Type	
Office Sc	Senate President	Disbursement For: Primary Other (spe	General ecify) ▼		
State: Full Nam	District: e (Last, First, Middle Initial)				Transaction ID: 34931341
	est Pennsylvania PAC (SV	VPA PAC)			Date of Disbursement
Mailing A	Mailing Address 499 S. Capitol St., S.W. Suite 404				06 M / D 15 / Y Y Y O Y O Y
City Washin	gton	State DC	Zip Code 20003		Amount of Each Disbursement this Period
Purpose	of Disbursement			011	3000.00
Candidate Southwe	e Name est Pennsylvania PAC (SV	VPA PAC)		Category/ Type	
Office Sc	ught: House Senate President	Disbursement For: Primary Other (spe	General		
State:	District: e (Last, First, Middle Initial)				
	r Congress				Transaction ID: 34967105 Date of Disbursement
Mailing A	ddress PO Box 2464				06 04 7 2010
City Sioux F	alls	State SD	Zip Code 57101		Amount of Each Disbursement this Perio
	of Disbursement			011	3500.00
	nard Curd			Category/ Type	
Office Sc	Senate President	Disbursement For:  X Primary Other (spe	2010 General		
Stata: SI					
State: SI	District. 01				11500.00

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SCHEDULE B (FEC Form 3X)	Hoo congrets asked to (-)	FOR LINE	NUMBER: PAGE 106 / 125
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	·
	Detailed Summary Page	21b 27	22 X 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem	lents may not be sold or used b		
or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
American College of Radiology Association	n Political Action Committe	ee	
Full Name (Last, First, Middle Initial) Rob Andrews U.S. House Committee			Transaction ID: 34983278 Date of Disbursement
Mailing Address 215 Fourth Avenue Suite 200			$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D & D \\ O & G \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & I & O \end{smallmatrix} \end{bmatrix}$
	State Zip Code NJ 07076		Amount of Each Disbursement this Period
Purpose of Disbursement			1000.00
		011	
Candidate Name Rep. Robert Andrews	7	Category/ Type	
	ment For: 2010 Primary General Other (specify)		
State: NJ District: 01			
Full Name (Last, First, Middle Initial) Jesse Jackson Jr For Congress			Transaction ID: 34983329 Date of Disbursement
Mailing Address P.O. Box 490286			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & O \\ O & J \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & I & O \end{smallmatrix} \end{bmatrix} $
,	State Zip Code IL 60649		Amount of Each Disbursement this Period
Purpose of Disbursement	Γ	011	2500.00
Candidate Name Rep. Jesse L. Jackson, Jr.	-	Category/ Type	
Office Sought: X House Disburse Senate President	ment For: 2010 Primary X General Other (specify)		
State: IL District: 02			
Full Name (Last, First, Middle Initial)			Transaction ID: 34983330
Mary Bono Mack Committee			Date of Disbursement
Mailing Address PO Box 3370			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & S \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & I & O \end{smallmatrix} \end{bmatrix}$
	State Zip Code CA 92263		Amount of Each Disbursement this Period
Purpose of Disbursement			1500.00
Candidate Name Rep. Mary Bono Mack		011 Category/ Type	
Office Sought:  X House Senate X President	ment For: 2010 Primary General Other (specify)	,	
State: CA District: 45			
SUBTOTAL of Disbursements This Page (optional)		<u></u>	5000.00

IT.	· ·	Use sepa	arate schedule(s)	FOR LINE	
	EMIZED DISBURSEMENTS		category of the Summary Page	(check only 21b 27	22 X 23 24 25 28 28c 29
	r Information copied from such Reports and Stater or commercial purposes, other than using the name				
$\rangle$	NAME OF COMMITTEE (In Full) American College of Radiology Association				
	Full Name (Last, First, Middle Initial) Cathy Mcmorris Rodgers For Congress				Transaction ID: 34983331 Date of Disbursement
	Mailing Address Box 137				$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & J \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Q & Y \\ Z & O & I & O \end{smallmatrix} \end{bmatrix}$
	City Spokane	State WA	Zip Code 99210		Amount of Each Disbursement this Period
	Purpose of Disbursement			011	1500.00
	Candidate Name Rep. Cathy McMorris Rodgers		2010	Category/ Type	
	Office Sought:  X House Senate President State: WA District: 05	ement For: Primary Other (spe	2010 X General ecify) ▼		
	Full Name (Last, First, Middle Initial)  Committee for the Preservation of Capital	ism (CPC)			Transaction ID: 35104790 Date of Disbursement
	Mailing Address PO Box 65314				$\begin{bmatrix}\begin{smallmatrix}M\\06\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\14\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}Y\\2010\end{smallmatrix}\end{bmatrix}^Y$
	City Washington	State DC	Zip Code 20036		Amount of Each Disbursement this Period
					E000.00
	Purpose of Disbursement			011	5000.00
	Purpose of Disbursement  Candidate Name Committee for the Preservation of Capital	ism (CPC)		011 Category/ Type	3000.00
	Candidate Name Committee for the Preservation of Capital Office Sought: House Disburs Senate President	ism (CPC) ement For: Primary Other (spe	General	Category/	5000.00
	Candidate Name Committee for the Preservation of Capital Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial)	ement For: Primary	General	Category/	Transaction ID: 35104794
	Candidate Name Committee for the Preservation of Capital Office Sought: House Senate President State: District:	ement For: Primary	General	Category/	
	Candidate Name Committee for the Preservation of Capital Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Heller For Congress Mailing Address PO Box 750580 City	ement For: Primary Other (spe	General ecify) ▼	Category/	Transaction ID: 35104794 Date of Disbursement
	Candidate Name Committee for the Preservation of Capital Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Heller For Congress Mailing Address PO Box 750580	ement For: Primary Other (spe	General ecify) ▼	Category/ Type	Transaction ID: 35104794 Date of Disbursement
	Candidate Name Committee for the Preservation of Capital Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Heller For Congress Mailing Address PO Box 750580  City Las Vegas	ement For: Primary Other (spe	General ecify) ▼	Category/	Transaction ID: 35104794 Date of Disbursement  M M M / D D M Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Candidate Name Committee for the Preservation of Capital Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Heller For Congress Mailing Address PO Box 750580  City Las Vegas Purpose of Disbursement  Candidate Name Mr. Dean Heller	ement For: Primary Other (spe	General ecify) ▼  Zip Code 89136  2010  X General	Category/ Type  011 Category/	Transaction ID: 35104794 Date of Disbursement  M M M / D D M / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

## SCHEDULE B (FEC Form 3X)

		Use separate schedule(s)	Check only	
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) American College of Radiology Association	e and address of any political cor	mmittee to so	
	Full Name (Last, First, Middle Initial) Bucshon For Congress			Transaction ID: 35104837 Date of Disbursement
	Mailing Address PO Box 250			06 15 7 2010
	City Newburgh	State Zip Code IN 47629		Amount of Each Disbursement this Perio
	Purpose of Disbursement		011	2500.00
	Candidate Name Mr. Larry Bucshon		Category/ Type	
	Office Sought:  X House Senate President State: IN District: 08	ment For: 2010 Primary X General Other (specify)		
	Full Name (Last, First, Middle Initial) John D. Dingell For Congress			Transaction ID: 35104840 Date of Disbursement
	Mailing Address 607 14th Street, Nw Suite 800			$\begin{bmatrix} 0 & 6 & M \\ 0 & 6 & M \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 \\ 0 & 1 & 6 \end{bmatrix} / \begin{bmatrix} 0 & 1 & 0 & 1 \\ 0 & 2 & 0 & 1 & 0 \end{bmatrix}$
	City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Perio
	Purpose of Disbursement  Candidate Name	C	011 Category/	2500.00
		ment For: 2010 Primary General Other (specify)	Туре	
	Full Name (Last, First, Middle Initial) Kirk For Senate			Transaction ID: 35104843  Date of Disbursement
	Mailing Address P.O. Box 8			$\begin{bmatrix} \begin{smallmatrix} M & G & M \\ O & G & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ Z & O & I & O \end{smallmatrix} \end{bmatrix}$
	City Winnetka	State Zip Code IL 60093		Amount of Each Disbursement this Perio
	Purpose of Disbursement  Candidate Name		011 Category/	2000.00
	Mr. Mark Kirk		Type	
	Office Sought:    House   Disburse     X Senate   President     State: IL   District:	ment For: 2010 Primary X General Other (specify)		
Г	UBTOTAL of Disbursements This Page (optional)			7000.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			E NUME	BER:			PA	GE	109	/ 125
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 288	X	23 28b	П	24 28c	$\Box$	25 29	26 30b
Any Information copied from such Reports and States or for commercial purposes, other than using the name											S
NAME OF COMMITTEE (In Full)											
American College of Radiology Association	n Political Action Committe	ee									
Full Name (Last, First, Middle Initial) Castle Campaign Fund						ion ID	eme		883		
Mailing Address PO Box 133				O	6 <sup>M</sup>	/ D	2 1	/ Y	ž	0 Ĭ (	) Y
City Wilmington	State Zip Code DE 19899			Am	ount o	of Each	n Disl	burse	ment	this I	Period
Purpose of Disbursement	Г	01	,	1 L					250	00.00	)
Candidate Name Mr. Michael Castle		01 Cateo	gory/								
Office Sought:    House   Disburs     X Senate   President	ement For: 2010 Primary X General Other (specify)										
State: DE District:											
Full Name (Last, First, Middle Initial) The Madison PAC				Dat	e of D	ion ID isburs	eme	-			
Mailing Address 235 STATE STREET SUITE #206				O		/ D	0 9	/ L	ž	0 Ì (	o <sup>¥</sup>
City SPRINGFIELD	State Zip Code MA 01103			Am	ount o	of Each	n Disl	burse	ment	this I	Period
Purpose of Disbursement		01	1						500	00.00	)
Candidate Name The Madison PAC	-	Cateo	gory/								
Senate President	ement For: Primary General Other (specify)										
State: District: Full Name (Last, First, Middle Initial)											
Friends Of Carolyn Mccarthy				Dat	e of D	ion ID isburs	eme				V
Mailing Address 151 Linden Road				O	6 <sup>™</sup>	<u> </u>	0 4	Ĺ	2	0 i (	) <sup>'</sup>
City Mineola	State Zip Code NY 11501			Am	ount o	of Each	n Disl	burse	ment	this I	Period
Purpose of Disbursement		01	1						300	00.00	)
Candidate Name Rep. Carolyn McCarthy		Categ	gory/								
Senate President	ement For: 2010 Primary X General Other (specify)										
State: NY District: 04											
SUBTOTAL of Disbursements This Page (optional)			<u> </u>					1	050	0.00	

TOTAL This Period (last page this line number only) ......

	PUEDOFE B (LE	•		rate schedule(s)		(check or	E NUMBER Ilv one)		PAGE	110/	125
	EMIZED DISBUF		Detailed S	category of the Summary Page		21b 27	22 28a	X 23 28b	24 28c	25 29	2
	y Information copied from s or commercial purposes, o										
$\rangle$	NAME OF COMMITTEE American College of I	, ,	iation Political	Action Commi	ttee						
V	Full Name (Last, First, Mi Dutch Ruppersberger	,					Date of	ction ID: Disbursen	nent		
	Mailing Address 22 V	Vest Padonia Ro	oad Suite C-14	1			06	<sup>/</sup> 23		2010	Y
	City Timonium		State MD	Zip Code 21093			Amoun	t of Each D			erioc
	Purpose of Disbursement					011			20	00.00	_
	Candidate Name Rep. C.A. Dutch Rupp	persberger				tegory/ ype					
	Pr	enate esident	bursement For:  X Primary Other (spe	2010 General cify)							
	State: MD District Full Name (Last, First, Mi						<b>T</b>	ID	0510000	<u> </u>	
	Dutch Ruppersberger							ction ID: Disbursem	nent		Y
	Mailing Address 22 \	Vest Padonia Ro	oad Suite C-14	1			0 6	23		2010	_
	City Timonium		State MD	Zip Code 21093			Amoun	t of Each D			erio
	Purpose of Disbursement				(	011	] L.		1(	00.00	_
	Candidate Name Rep. C.A. Dutch Rupp	persberger				tegory/ ype					
	Pr	enate esident	bursement For: Primary Other (spe	2010 X General cify) <b>V</b>							
	State: MD District Full Name (Last, First, Mi Thornberry For Congr	ddle Initial)						ction ID: Disbursem		6	
	Mailing Address P.O	. Box 9392					06	24	) / Y	2010	Y
	City Amarillo		State TX	Zip Code 79105			Amoun	t of Each D	isburseme	nt this Pe	ərio
	Purpose of Disbursement					011	T L.		15	500.00	_
	Candidate Name Rep. Mac Thornberry				Ca	tegory/ ype					
		ouse Dis enate esident	bursement For: Primary Other (spe	2010  X General cify)							
	State: TX Distric	1.40									

	CHEDULE B (FEC FOIIII .	· 1		arate schedule(s)			PR LINE neck onl	: NUMBI v one)	in.			PAC	GE '	111/	125
	EMIZED DISBURSEMEN		Detailed	category of the Summary Page		À	21b 27	22 28a	Х	23 28b		24 28c		25 29	
	y Information copied from such Reports for commercial purposes, other than using														
$\rangle$	NAME OF COMMITTEE (In Full) American College of Radiology A														
<u>/</u>	Full Name (Last, First, Middle Initial) David Scott For Congress							_		sburs	emen	1278 t	311		
	Mailing Address P.O. Box 96082	21						0 <sup>M</sup> 6	М	D 2	2 4	/ Y	žc	) 1 0	Y
	City Riverdale		State GA	Zip Code 30296				Amo	unt of	Each	Disb	ursen	nent t	his P	erio
	Purpose of Disbursement				Г	01	1	L.					100	0.00	
	Candidate Name Rep. David Albert Scott					ateg Typ	-								
	Office Sought:  X House Senate President	Disburser X	ment For: Primary Other (spe	2010 General											
	State: GA District: 13  Full Name (Last, First, Middle Initial)											1278	330		
	Congressman Waxman Campaig  Mailing Address 6380 Wilshire E							Date 0 6	M	sburs	emen 29	t / Y	ž	) 1 0	Y
	City Los Angeles		State CA	Zip Code 90048				Amo	unt of	Each	Disb	ursen			erio
	Purpose of Disbursement					01	1	<u> </u>					150	0.00	
	Candidate Name Rep. Henry A. Waxman					ateg Typ	•								
	Office Sought:  X House Senate President	Disburser	ment For: Primary Other (spe	2010 X General ecify) ▼											
	State: CA District: 30  Full Name (Last, First, Middle Initial)  Friends Of Dave Reichert									on ID sburs		1278 t	337		
	Mailing Address P. O. Box 5332	2						0 <sup>M</sup> 6	М	D 3	3 O	/ Y	ž C	) 1 0	Y
	City Bellevue		State WA	Zip Code 98015				Amo	unt of	Each	Disb	ursen	nent t	his P	erio
	Purpose of Disbursement				Г	01	1						150	0.00	-
	Candidate Name Rep. David George Reichert				C	ateg Typ	ory/								
	Office Sought:  X House Senate President  State: WA  District: 08	Disburser	ment For: Primary Other (spe	2010 X General ecify) ▼											
	State. 1171 District. 00														

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		i	PAGE 11	2 / 125
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 X 2	3 8b 24 28	25 c 29	—
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)	and dudieses of any pention of					
American College of Radiology Association	Political Action Committ	tee				
Full Name (Last, First, Middle Initial) Sheriff PAC			Transaction Date of Disk		27849	
Mailing Address 1115 Massachusetts Ave	., N.W.		06	<sup>D</sup> 30 /	žoi	0
,	State Zip Code DC 20005		Amount of E	ach Disbur		
Purpose of Disbursement		011			2000.	00
Candidate Name Sheriff PAC		Category/ Type				
Senate President	ment For: Primary General Other (specify) ▼					
State: District:						
Full Name (Last, First, Middle Initial) Upton For All Of Us			Transaction Date of Disk	oursement		
Mailing Address P.O. Box 490			06	<sup>D</sup> 30 /	<sup>°</sup> 201	0
•	State Zip Code MI 49085		Amount of E	ach Disbur		-
Purpose of Disbursement		011			1500.	00
Candidate Name Rep. Frederick Stephen Upton		Category/ Type				
	ment For: 2010 Primary General Other (specify)					
State: MI District: 06						
Full Name (Last, First, Middle Initial) David Vitter For Us Senate			Transaction Date of Disk	oursement		
Mailing Address PO Box 8175			0 6	<sup>D</sup> 1 7 /	ž 0 i	0 1
	State Zip Code LA 70011		Amount of E	ach Disbur		
Purpose of Disbursement		011			1500.	00
Candidate Name Sen. David Vitter		Category/ Type				
X Senate President	ment For: 2010 Primary X General Other (specify)					
State: LA District:						
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>			5000.0	00
TOTAL This Period (last page this line number only)						

TEMIZED DISBURSEMEN	for each category of the Detailed Summary Page	(check only	y one)
	Detailed Summary Fage	21b 27	22 X 23 24 25 28 28a 28b 28c 29
ny Information copied from such Reports r for commercial purposes, other than usi  NAME OF COMMITTEE (In Full)  American College of Radiology A	ng the name and address of any politica	al committee to so	
Full Name (Last, First, Middle Initial) Louisiana Reform PAC  Mailing Address P.O. Box 1542			Transaction ID: 35129117 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Shreveport Purpose of Disbursement	State Zip Code LA 71165	I	Amount of Each Disbursement this Period 5000.00
Candidate Name Louisiana Reform PAC		011 Category/ Type	
Office Sought:  House Senate President State: District:	Disbursement For:  Primary General  Other (specify) ▼		
Full Name (Last, First, Middle Initial) New Pioneers PAC			Transaction ID: 35166907  Date of Disbursement
Mailing Address 228 S WASHIN STE 115			06 24 2010
City ALEXANDRIA	State Zip Code VA 22314		Amount of Each Disbursement this Perio
Candidate Name New Pioneers PAC Office Sought: House	Disbursement For:	011 Category/ Type	
Senate President State: District:	Primary General Other (specify) ▼		
Full Name (Last, First, Middle Initial) Common Sense Common Solution	ons PAC		Transaction ID: 35167021 Date of Disbursement
Mailing Address 901 N Washing Suite 300	ton St		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Alexandria	State Zip Code VA 22314		Amount of Each Disbursement this Perio
Purpose of Disbursement  Candidate Name		011 Category/	2500.00
Common Sense Common Solution Office Sought:  Senate President State: District:	ons PAC  Disbursement For:  Primary General  Other (specify) ▼	Туре	
SUBTOTAL of Disbursements This Page	e (optional)	<u></u>	12500.00

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s) (check	LINE NUMBER: PAGE 114 / 125 conly one)
ITEMIZED DISBURSEMENTS	Detailed Summary Page 21	b 22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and Stat or for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full)  American College of Radiology Associate	··	
Full Name (Last, First, Middle Initial) Majority Committee PAC		Transaction ID: 35168095 Date of Disbursement
Mailing Address P.O. BOX 10134		06 06 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
City BAKERSFIELD	State Zip Code CA 93389	Amount of Each Disbursement this Period
Purpose of Disbursement	011	5000.00
Candidate Name Majority Committee PAC	Category/ Type	
Senate President	sement For: Primary General Other (specify) ▼	
State: District:  Full Name (Last, First, Middle Initial)  NEW PAC		Transaction ID: 35168258 Date of Disbursement
Mailing Address P.O. BOX 7480		06 06 24 7 2010
City VISALIA	State Zip Code CA 93290	Amount of Each Disbursement this Period
Purpose of Disbursement	011	5000.00
Candidate Name NEW PAC	Category/ Type	
Office Sought: House Disbu Senate President State: District:	sement For:  Primary General  Other (specify) ▼	
Full Name (Last, First, Middle Initial) Voice for Freedom		Transaction ID: 35168332 Date of Disbursement
Mailing Address 2451 Cumberland Park	way Suite 326	06 06 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
City Atlanta	State Zip Code GA 30339	Amount of Each Disbursement this Perio
Purpose of Disbursement	011	5000.00
Candidate Name Voice for Freedom	Category/ Type	
Senate President	sement For:  Primary General  Other (specify) ▼	
State: District:		
		15000.00

## SCHEDULE B (FEC Form 3X)

TEMES DISPUSSION	Use separate schedule(s	) (check on	= NUMBER: PAGE 115 / 125
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and State or for commercial purposes, other than using the new NAME OF COMMITTEE (In Full)	ame and address of any politica	al committee to so	
American College of Radiology Associa	ion Political Action Comm	ee	
Full Name (Last, First, Middle Initial)  Majority Initiative To Keep Electing Reputation Address  PO Box 65796	ublicans F		Transaction ID: 35168406 Date of Disbursement  M M M D D D D Y Y Y Y Y Y Y Y Y Y Y Y Y
City Washington	State Zip Code DC 20035		Amount of Each Disbursement this Period
Purpose of Disbursement		011	5000.00
Candidate Name Majority Initiative To Keep Electing Rep	ıblicans F	Category/ Type	
Senate President	rsement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			Transaction ID: 35168467
John S Fund			Date of Disbursement
Mailing Address PO Box 65796			$\begin{bmatrix} 0 & 0 & 0 & 0 \\ 0 & 0 & 0 & 0 \end{bmatrix} \begin{bmatrix} 0 & 0 & 0 \\ 0 & 2 & 4 \end{bmatrix} \begin{bmatrix} 0 & 0 & 0 \\ 0 & 2 & 0 & 1 \end{bmatrix} \begin{bmatrix} 0 & 0 & 0 \\ 0 & 2 & 0 & 1 \end{bmatrix}$
City Washington	State Zip Code DC 20035		Amount of Each Disbursement this Period
Purpose of Disbursement		011	2500.00
Candidate Name John S Fund		Category/ Type	
Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) Acton PAC			Transaction ID: 35168596 Date of Disbursement
Mailing Address P.O. Box 442			06 06 24 2010
City Sharpsburg	State Zip Code GA 30277		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2500.00
Candidate Name Acton PAC		Category/ Type	
Senate President	rsement For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (options	AI)		10000.00

	Use separate schedule(s)	FOR LINE NUMBER: PAGE 116 / 125 (check only one)
ITEMIZED DISBURSEMENTS	Detailed Summary Page	21b 22 X 23 24 25 27 28a 28b 28c 29
Any Information copied from such Reports and Stator for commercial purposes, other than using the na		
NAME OF COMMITTEE (In Full) American College of Radiology Associate	ion Political Action Committee	
Full Name (Last, First, Middle Initial) Kirk For Senate		Transaction ID: 35170203 Date of Disbursement
Mailing Address P.O. Box 8		06 / 16 / 2010
City Winnetka	State Zip Code IL 60093	Amount of Each Disbursement this Period
Purpose of Disbursement		1000.00
Candidate Name Mr. Mark Kirk		egory/ ype
Office Sought:    House   Disbu     X   Senate     President	rsement For: 2010 Primary X General Other (specify) ▼	
State: IL District: Full Name (Last, First, Middle Initial)		
Ryan Frazier For Colorado		Transaction ID: 35170222 Date of Disbursement
Mailing Address PO Box 140182		066 / 18 / 2010
City Edgewater	State Zip Code CO 80214	Amount of Each Disbursement this Perio
Purpose of Disbursement		1000.00
Candidate Name Mr. Ryan Frazier		egory/ ype
Office Sought: X House Disbu Senate President	xsement For: 2010  X Primary General  Other (specify)	
State: CO District: 07  Full Name (Last, First, Middle Initial)		
Martin Heinrich For Congress, Inc.		Transaction ID: 35426834  Date of Disbursement
Mailing Address 2118 Central Avenue 9 #71	Se	06 / 21 / 2010
City Albuquerque	State Zip Code NM 87106	Amount of Each Disbursement this Perio
Purpose of Disbursement		3000.00
Candidate Name Rep. Martin Heinrich		egory/ ype
Senate President	rsement For: 2010 Primary X General Other (specify) ▼	
State: NM District: 01		

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)			E NU	JMBEI	R:			РА	GE	117	125
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27		22 28a	X	23 28b		24 28c	Н	25 29	26 30b
Any Information copied from such Reports and States or for commercial purposes, other than using the name												5
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , ,											
American College of Radiology Association	on Political Action Committe	ee										
Full Name (Last, First, Middle Initial) Comeback PAC					<b>Fransa</b> Date o		sburs	eme		885		
Mailing Address P.O. Box 40366					0 <sup>M</sup> 6	M /	D 2	21	/ Y	ž	0 Ĭ (	) <sup>Y</sup>
City Washington	State Zip Code DC 20016			-	Amour	nt of	Each	Dis	burse	men	t this	Period
Purpose of Disbursement		011	$\overline{}$	11		_				25	00.00	)
Candidate Name Comeback PAC		Catego Type	•									
Senate President	ement For:  Primary General  Other (specify) ▼											
State: District:												
Full Name (Last, First, Middle Initial) Victory Now PAC					Transa Date o	f Di	sburs	eme				V
Mailing Address 10605 Concord Street Suite 202					0 <sup>M</sup> 6	M /	D 2	2 1	/ L	ž	0 1 (	) <sup>*</sup>
City Kensington	State Zip Code MD 20895			1	Amour	nt of	Each	Dis	burse			Period
Purpose of Disbursement		011						0		50	00.00	)
Candidate Name Victory Now PAC		Catego Type	ry/									
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)											
State: District:												
Full Name (Last, First, Middle Initial) Silver State 21st Century PAC					Transa Date o	f Di	sburs	eme				V
Mailing Address 3069 Conquista Ct.					0 6	M /	<sup>D</sup> 1	6	/   4	ž	0 1 (	)
City Las Vegas	State Zip Code NV 89121			1	Amour	nt of	Each	Dis	burse	men	t this	Period
Purpose of Disbursement	Г		$\overline{}$							15	00.00	)
Candidate Name Silver State 21st Century PAC		011 Catego Type										
Senate President	ement For: Primary General Other (specify)											
State: District:												
SUBTOTAL of Disbursements This Page (optional)			<u> </u>							900	0.00	

TOTAL This Period (last page this line number only) ......

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Reports and State or for commercial purposes, other than using the nar			
NAME OF COMMITTEE (In Full) American College of Radiology Associati	on Political Action Committe	e	
Full Name (Last, First, Middle Initial) Ryan Frazier For Colorado			Transaction ID: 35426922 Date of Disbursement
Mailing Address PO Box 140182			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 6 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 0 \end{smallmatrix} \end{bmatrix}$
City Edgewater	State Zip Code CO 80214		Amount of Each Disbursement this Period
Purpose of Disbursement		011	2000.00
Candidate Name Mr. Ryan Frazier		Category/ Type	
Senate President	sement For: 2010  K Primary General  Other (specify) ▼		
State: CO District: 07  Full Name (Last, First, Middle Initial)			
Friends Of Bill Posey			Transaction ID: 35426926 Date of Disbursement
Mailing Address P. O. Box 360877			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & G \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & O \end{smallmatrix} \end{bmatrix}$
City Melbourne	State Zip Code FL 32936		Amount of Each Disbursement this Period
Purpose of Disbursement		011	2000.00
Candidate Name Rep. Bill Posey		Category/ Type	
Senate President	sement For: 2010  C Primary General  Other (specify)	,	
State: FL District: 15  Full Name (Last, First, Middle Initial)			Transaction ID: 35426929
Charles A. Gonzalez Congressional Cam	paign		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 12612			
City San Antonio	State Zip Code TX 78212		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	3000.00
Candidate Name Rep. Charles A. Gonzalez		Category/ Type	
Senate President	sement For: 2010 Primary X General Other (specify) ▼		
State: TX District: 20			
SUBTOTAL of Disbursements This Page (optional			7000.00

# SCHEDULE B (FEC Form 3X)

	Use separate schedule(	s) (check onl	= NUMBER: PAGE 119 / 125 ly one)
ITEMIZED DISBURSEME	for each category of the Detailed Summary Page		22 X 23 24 25 28a 28b 28c 29
Any Information copied from such Report or for commercial purposes, other than to NAME OF COMMITTEE (In Full)			for the purpose of soliciting contributions olicit contributions from such committee
American College of Radiology	Association Political Action Comr	nittee	
Full Name (Last, First, Middle Initial) Friends Of John Boehner			Transaction ID: 35426930 Date of Disbursement
Mailing Address 7908 Cincinn Suite I	ati Dayton Road		06 06 7 21 7 2010
City West Chester	State Zip Code OH 45069		Amount of Each Disbursement this Period
Purpose of Disbursement		011	5000.00
Candidate Name Rep. John A. Boehner		Category/ Type	
Office Sought: X House Senate President	Disbursement For: 2010 Primary X General Other (specify) ▼	l	
State: OH District: 08  Full Name (Last, First, Middle Initial)			Transaction ID: 05440500
Jo Bonner For Congress Comr			Transaction ID: 35440592 Date of Disbursement
Mailing Address P.O.Box 8512	232		06 06 22 7 2010
City Mobile	State Zip Code AL 36685		Amount of Each Disbursement this Perio
Purpose of Disbursement		011	2500.00
Candidate Name Rep. Josiah Robins Bonner, Jr		Category/ Type	
Office Sought:  X House Senate President State: AL District: 01	Disbursement For: 2010 Primary X Genera Other (specify) ▼	1	
Full Name (Last, First, Middle Initial) Dave Camp For Congress 201	0		Transaction ID: 35440593 Date of Disbursement
Mailing Address 5915 Eastma Suite 100	ın Avenue		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Midland	State Zip Code MI 48640		Amount of Each Disbursement this Perio
Midiana			1000.00
Purpose of Disbursement		011	
		O11 Category/ Type	
Purpose of Disbursement  Candidate Name	Disbursement For: 2010 Primary X Genera Other (specify) ▼	Category/ Type	

 CHEDULE B (FEC FOIII 3X)	Use separate schedule(s		LINE NUMBER	٦	PAGE 120	1 / 125
 EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 22 2 27 28a		3c 29	
y Information copied from such Reports and Sta or commercial purposes, other than using the n						
NAME OF COMMITTEE (In Full) American College of Radiology Associa						
 Full Name (Last, First, Middle Initial)			Transa	action ID: 354	40594	
Friends Of Congressman Tim Holden			Date o	f Disbursement		
Mailing Address 18 N. Second St., Box PO Box 37	37		06		y žo j	0 1
City Saint Clair	State Zip Code PA 17970		Amour	nt of Each Disbu	rsement this	Perio
Purpose of Disbursement					1000.0	0
Candidate Name Rep. Tim Holden		011 Categor Type	y/			
<u> </u>	rsement For: 2010 Primary X General Other (specify)	Турс				
Full Name (Last, First, Middle Initial)			Transa	action ID: 354	40608	
Robin Smith For Tennessee				f Disbursement		
Mailing Address 6231 Perimeter Drive	Suite 113		0 <sup>M</sup> 6 N	24	y žo j	0 <sup>Y</sup>
City Chattanooga	State Zip Code TN 37421		Amour	nt of Each Disbu	rsement this	Perio
Purpose of Disbursement		011	7 L.		5000.0	0
Candidate Name Robin Smith		Categor Type	у/			
Office Sought:  X House Senate President State: TN District: 03	rsement For: 2010  X Primary General Other (specify)	,				
 Full Name (Last, First, Middle Initial) Diane Black For Congress				action ID: 354 f Disbursement	40609	
Mailing Address 819 Plantation Blvd			0 <sup>M</sup> 6 N	24	y žo i	0 Y
City Gallatin	State Zip Code TN 37066		Amour	nt of Each Disbu	rsement this	Perio
Purpose of Disbursement		011	7 L.		5000.0	0
Candidate Name Ms. Diane Black		Categor Type	у/			
Office Sought: X House Disbu	rsement For: 2010  X Primary General  Other (specify)					
State: TN District: 06						

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	_	E NUMBER: PAGE 121 / 12								
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28k	24 28c	25 29	26 30b					
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name											
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , , ,										
American College of Radiology Association	Political Action Committe	e									
Full Name (Last, First, Middle Initial) Pioneer Political Action Committee			Transaction I Date of Disbu		28						
Mailing Address 701 8th Street, N.W. Suite 500			06	2 4 Y	ž 0 1 0 °						
City Washington	State Zip Code DC 20001		Amount of Each Disbursement this Period								
Purpose of Disbursement		011			5000.00						
Candidate Name Pioneer Political Action Committee		Category/ Type									
Senate President	ment For: Primary General Other (specify)										
State: District:											
Full Name (Last, First, Middle Initial) Friends Of Glenn Nye			Transaction I Date of Disbu	rsement							
Mailing Address PO Box 68444			06	D 2 1 Y Y 2 0 1 0 Y							
City Virginia Beach	State Zip Code VA 23471		Amount of Ea		riod						
Purpose of Disbursement		011		1	000.00						
Candidate Name Rep. Glenn C. Nye, III		Category/ Type									
Office Sought: X House Disburse Senate President	ment For: 2010 Primary X General Other (specify) ▼										
State: VA District: 02											
Full Name (Last, First, Middle Initial) Pat Meehan For Congress			Transaction I Date of Disbu	rsement							
Mailing Address 5035 Township Line Roa PO Box 308	d		06	24	ž 0 Ĭ 0 Š						
City Drexel Hill	State Zip Code PA 19026		Amount of Ea			riod					
Purpose of Disbursement	Г	011		2	2000.00						
Candidate Name Mr. Patrick Meehan		Category/ Type									
Office Sought:    X   House   Disburse     Senate   President     State: PA   District: 07	ment For: 2010 Primary X General Other (specify)										
SUBTOTAL of Disbursements This Page (optional)				8	00.00						
TOTAL This Period (last page this line number only)											

ITEMIZ		3 (FEC Form	-	Use sepa	arate schedule(s)		E NUMBER: PAGE 122 / 125
	ZED DI	SBURSEMEN	ITS	for each	category of the Summary Page	(check or 21b 27	22   X 23   24   25   28a   28b   28c   29
							of for the purpose of soliciting contributions solicit contributions from such committee
NAME	E OF COM	MITTEE (In Full) ege of Radiology A					
	lame (Last, nds Of Da	First, Middle Initial) n Maffei					Transaction ID: 35455644 Date of Disbursement
Mailin	Mailing Address PO Box 74						06
City Syrad	cuse			tate IY	Zip Code 13214		Amount of Each Disbursement this Period
	ose of Disbu	irsement				011	1000.00
Mr. D	idate Name Daniel Mat		T so t		0040	Category/ Type	
Office State:	e Sought:	X House Senate President District: 25		nent For: Primary Other (spe	2010 General ecify) ▼		
Full N		First, Middle Initial)					Transaction ID: 35456016 Date of Disbursement
Mailin	Mailing Address PO Box 50100						$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Sprin	ngfield			tate 10	Zip Code 65805		Amount of Each Disbursement this Perio
	Purpose of Disbursement					011	5000.00
	Candidate Name Rep. Roy Blunt					Category/ Type	
		t				71	
Rep. Office	Roy Blun Sought:	X House Senate President		nent For: Primary Other (spe	2010 General	71.	
Rep. Office State:	Roy Blun e Sought: : MO lame (Last,	X House Senate	XF	Primary	General		Transaction ID: 35482404 Date of Disbursement
State: Full N John	Roy Blun e Sought: : MO lame (Last,	X House Senate President District: 07  First, Middle Initial)	X	Primary	General		
State: Full N John	Roy Blun e Sought: : MO lame (Last, n Sullivan ng Address	X House Senate President District: 07  First, Middle Initial) For Congress Inc	x 470840	Primary	General		Date of Disbursement  O 6 Disbursement  D 2 D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
State:  State:  Full N John  Mailin  City Tulsa Purpo	Roy Blun e Sought: : MO lame (Last, n Sullivan ng Address a ose of Disbu	X House Senate President District: 07 First, Middle Initial) For Congress Inc Post Office Box	x 470840	Primary Other (spe	General ecify) ▼  Zip Code	Q11 <u></u>	Date of Disbursement  O 6
State: Full N John Mailing City Tulsa Purpo Candi Rep.	Roy Blun e Sought: : MO lame (Last, n Sullivan ng Address a ose of Disbu idate Name John Sull	X House Senate President District: 07 First, Middle Initial) For Congress Inc Post Office Books	x 470840	Primary Other (spe tate OK	General ecify) ▼  Zip Code 74147		Date of Disbursement  O 6 Disbursement  D 2 D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
State: Full N John Mailing City Tulsa Purpo Candi Rep.	Roy Blun e Sought:  : MO lame (Last, n Sullivan ng Address a ose of Disbu idate Name John Sull e Sought:	X House Senate President District: 07  First, Middle Initial) For Congress Inc  Post Office Box	x 470840  St C	Primary Other (spe tate OK	General ecify) ▼  Zip Code 74147  2010  General	011 Category/	Date of Disbursement  O 6 Disbursement  O 6 Disbursement  O 7 D D D Y Y Y Y O Y O Y  Amount of Each Disbursement this Period

# SCHEDULE B (FEC Form 3X)

ITELUZED DIODUDOSIASIAS	Use separate schedule(s)	FOR LINE NUMBER: PAGE 123 / 125 (check only one)			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 22 X 23 24 25 27 28a 28b 28c 29			
or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full)	me and address of any political com				
American College of Radiology Associa	ion Political Action Committee				
Full Name (Last, First, Middle Initial) Heller For Congress  Mailing Address PO Box 750580		Transaction ID: 35491064 Date of Disbursement  M 6 M / D 2 9 / Y 2 0 1 0			
City Las Vegas	State Zip Code NV 89136	Amount of Each Disbursement this Period			
Purpose of Disbursement		011			
Candidate Name Mr. Dean Heller	-	ategory/ Type			
Senate President	resement For: 2010 Primary X General Other (specify)				
State: NV District: 02  Full Name (Last, First, Middle Initial)		Transaction ID: 35491133			
Davis For Congress/Friends Of Davis	Date of Disbursement				
Mailing Address 5956 W. Race Avenue	06 06 7 29 7 2010				
City Chicago	State Zip Code IL 60644	Amount of Each Disbursement this Period			
Purpose of Disbursement  Candidate Name	Ca	011 2500.00 attegory/			
Rep. Danny K. Davis  Office Sought:  X House Senate President State: IL District: 07	rsement For: 2010 Primary X General Other (specify)	Туре			
Full Name (Last, First, Middle Initial) Mary Bono Mack Committee		Transaction ID: 35491134 Date of Disbursement			
Mailing Address PO Box 3370		06 06 7 29 7 2010			
City Palm Springs	State Zip Code CA 92263	Amount of Each Disbursement this Period			
Purpose of Disbursement	011 2500.00				
Candidate Name Rep. Mary Bono Mack	Candidate Name Cate				
Senate President	rsement For: 2010 Primary X General Other (specify)				
State: CA District: 45					
		6000.00			

SCHEDULE B (FEC Form 3X)	Use separate s	Use separate schedule(s) FOR LINE NUMBI						PAGE 124 / 125					
ITEMIZED DISBURSEMENTS	for each catego Detailed Summ	ory of the (			eck only 21b 27	22 28a	Х	23 28b		24 280		25 29	
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam													3
NAME OF COMMITTEE (In Full)  American College of Radiology Associatio						noit conti	1001	10110		11 34011			
Full Name (Last, First, Middle Initial) Lee Terry For Congress						Date	of D	isbu	rser	D /			Y
Mailing Address PO Box 540098						0 6		Ĺ	2 9	9	2	2 0 1 C	)
City Omaha	Code 54				Amou	int o	f Ea	ch [	Disburs	-			
Purpose of Disbursement  Candidate Name	[		011 atego					•	•	20	500.00	)	
Rep. Lee Terry  Office Sought:  X House Senate President  State: NE District: 02		2010 General		Туре	,								
Full Name (Last, First, Middle Initial) Steve Israel For Congress Committee						<b>Trans</b> Date		-	rser		1149	)	
Mailing Address PO Box 777						0 6	М	/ [	2 9	9 /	Y	2 o 1 c	) <sup>Y</sup>
City Deer Park	State Zip (	 Code '29				Amount of Each Disbursement this					nt this f	Period	
Purpose of Disbursement			011				_	_		25	00.00	)	
Candidate Name Rep. Steve J. Israel					ory/								
Office Sought:  X House Senate President State: NY District: 02		2010 General											
Full Name (Last, First, Middle Initial) Andy Harris For Congress						Date	of D	_	rser		2479	)	
Mailing Address PO Box 1527						0 6	М	/ [	3 (	0 /	Y	2 o 1 c	) <sup>Y</sup>
City Annapolis				Amou	int o	f Ea	ch [	Disburs	emer	nt this f	Period		
Annapolis MD 21404 Purpose of Disbursement						L.					50	00.00	)
Candidate Name Mr. Andrew Harris		Ca	011 atego Typo	ory/									
Office Sought: X House Disburse Senate X President	ement For: Primary Other (specify)	2010 General		. 76.	-								
State: MD District: 01									_				
SUBTOTAL of Disbursements This Page (optional)						L		_			100	00.00	)
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ΙT	EMIZED DISBURSEMENTS	for each category of the	(check onl	y one)							
••	LIVIIZED DISDOTISEIVIENTS	Detailed Summary Page	21b	22 23 24 25 26							
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or i	for commercial purposes, other than using the r	ame and address of any political co	mmittee to so	olicit contributions from such committee							
$\overline{}$	NAME OF COMMITTEE (In Full)										
$\rangle$	American College of Radiology Associa	ion Political Action Committe	ee								
	Full Name (Last, First, Middle Initial)			Transaction ID: 35669869							
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			06  30  Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
	Mailing Address P.O. Box 27025			06 30 2010							
	City	State Zip Code		Amount of Each Disbursement this Period							
	Richmond	VA 23261-7025									
	Purpose of Disbursement	- I		574.39							
	Bank Fees		001								
	Candidate Name		Category/								
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	Office Sought: House Disb	rsement For:		Bank Fees							
	Senate	Primary General		Dank i ees							
	President	Other (specify) ▼									
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SUBTOTAL of Disbursements This Page (optional)	•				574.39	
TOTAL This Period (last page this line number only)	<u> </u>				574.39	